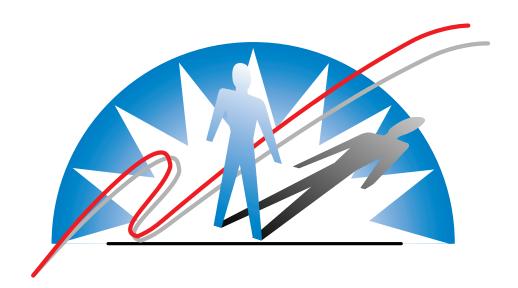
# Montana Youth Risk Behavior Survey

**Alternative Schools** 



Montana Office of Public Instruction

## MONTANA YOUTH RISK BEHAVIOR SURVEY REPORT - 2003 FOR ALTERNATIVE SCHOOLS

## STATEWIDE ANALYSIS OF SELECTED BEHAVIOR RISK FACTORS

**July 2003** 

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#### ACKNOWLEDGMENT

The 2003 Youth Risk Behavior Survey (YRBS) report is a continuation of the surveillance and reporting system for adolescent risk behaviors developed by the Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion, U.S. Centers for Disease Control and Prevention (CDC). The YRBS was first used in Montana in 1991. The Montana Office of Public Instruction and Superintendent Linda McCulloch acknowledge the participation, support and cooperation of those persons who made the 2003 Montana Youth Risk Behavior Survey possible. Sincere appreciation is expressed to:

- the U.S. Centers for Disease Control and Prevention, Division of Adolescent and School Health, Surveillance Research Section, and WESTAT Technical Assistance Project;
- the co-sponsors of the YRBS -- the Montana Board of Crime Control, the Montana Department of Public Health and Human Services, the Billings Area Indian Health Service, the Montana Department of Transportation, Healthy Mothers/Healthy Babies Montana Coalition, and Blue Cross and Blue Shield of Montana;
- the district superintendents, school principals and teachers who cooperated with and supported the survey;

and, most importantly,

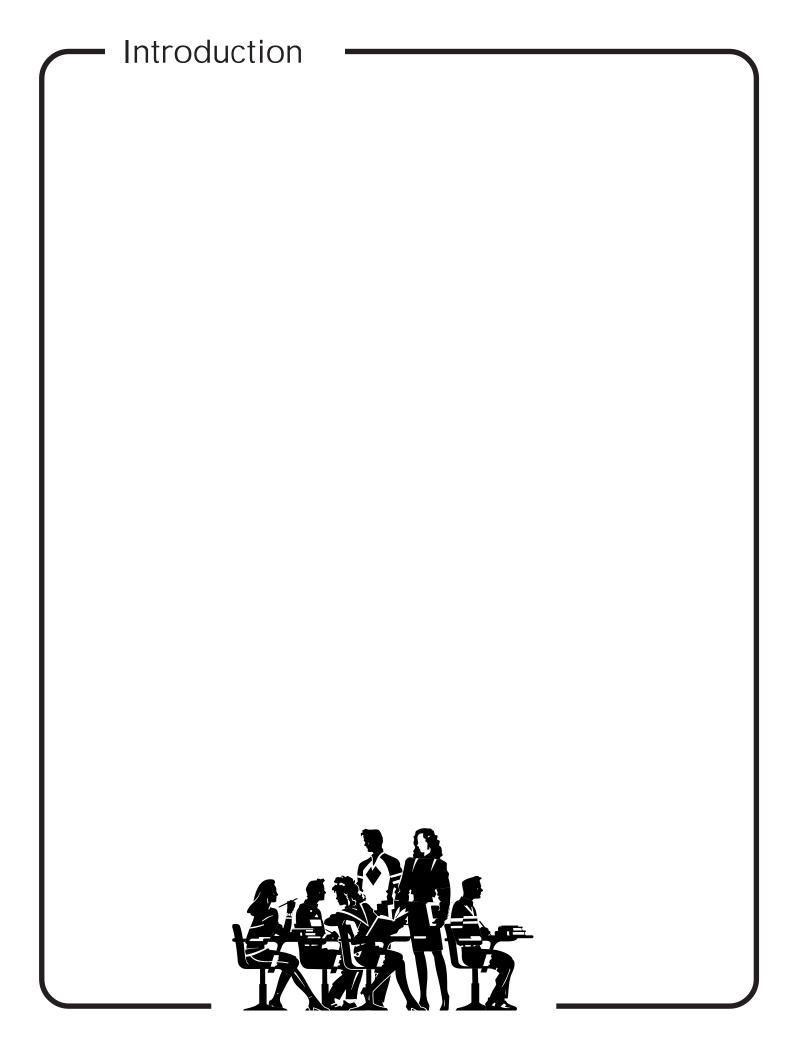
the Montana students who participated in the survey.

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#### I. INTRODUCTION

The Youth Risk Behavior Surveillance System is an epidemiologic surveillance system that was established by the U.S. Centers for Disease Control and Prevention (CDC) to help monitor the prevalence of behaviors that not only influence youth health, but also put youth at risk for the most significant health and social problems that can occur during adolescence and adulthood. A review of the leading causes of death among youth aged 15-24 in the United States reveals that nearly 72 percent of all deaths in this age group are due to four causes: motor-vehicle crashes (31 percent), other unintentional injuries (11 percent), homicides (18 percent), and suicides (12 percent). Considerable acute and chronic morbidity also result from these causes.

Nationally, substantial morbidity and social problems also result from the approximately one million pregnancies that occur each year among females aged 15-19 years and the estimated three million cases of sexually transmitted diseases (STDs) that occur each year among persons aged 10-19 years. One out of every six cases (one of five in Montana) of acquired immunodeficiency syndrome (AIDS) that is diagnosed in the United States occurs among those who are aged 20 to 29 years old. Since the average incubation period between human immunodeficiency virus (HIV) infection and AIDS diagnosis is ten years, a high proportion of those 20 to 29 year olds diagnosed with AIDS were infected as teenagers. HIV infection is now reported as the fifth leading cause of death among persons aged 15 to 24 years old.

Mortality, morbidity, and social problems that teenagers encounter are largely related to a small number of negative behaviors such as drinking and driving and sexual intercourse at a young age. Tobacco use, excessive consumption of fats, and insufficient physical activity (behaviors formed during adolescence) are known to lead to diseases that are not manifest until adulthood. These behaviors and associated health problems are largely preventable.

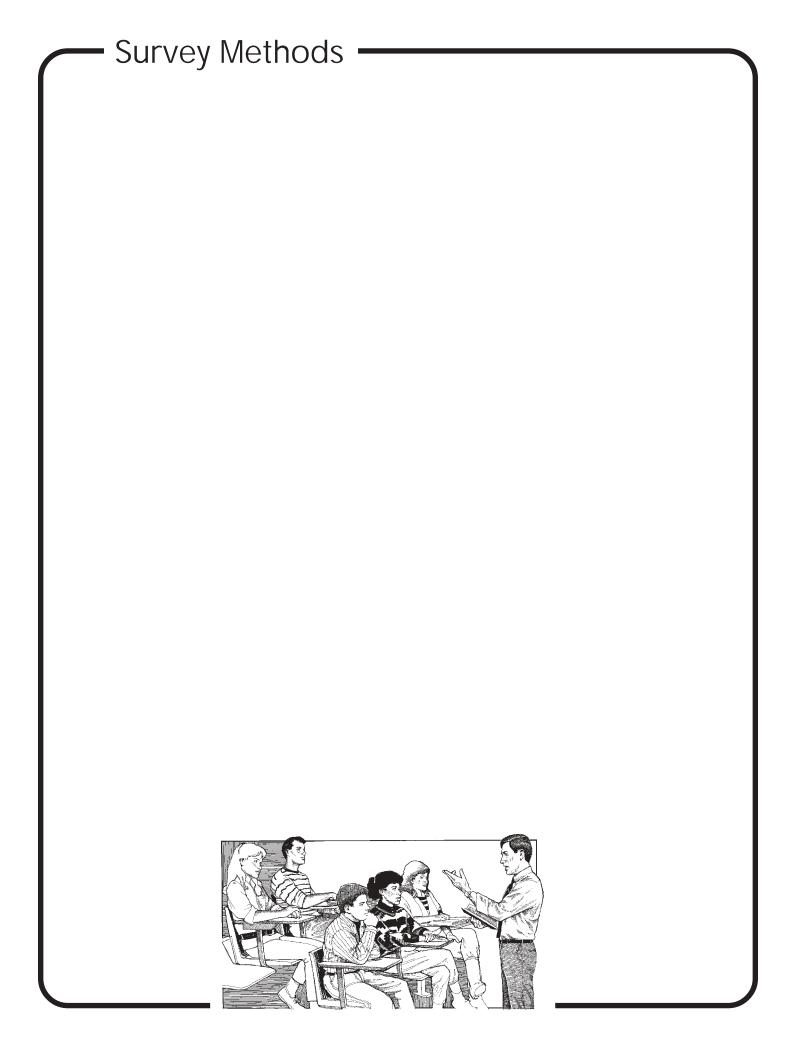
In 1988, CDC initiated a process to identify and monitor important health behaviors among youth. The leading causes of mortality, morbidity, and social problems among youth were analyzed and behaviors contributing to these problems were identified and categorized into six risk areas: 1) behaviors that result in unintentional and intentional injuries; 2) tobacco use; 3) alcohol and drug abuse; 4) sexual behaviors that result in HIV infection, other sexually transmitted diseases, and unintended pregnancies; 5) physical inactivity; and 6) dietary behaviors.

The purpose of the Youth Risk Behavior Survey (YRBS) is to assist educators and health professionals in determining the prevalence of the aforementioned health-risk behaviors among youth. This report describes the results of the survey and the methods used to conduct the survey. The results will be used to focus the continuing development of statewide comprehensive health education and to reduce those health behaviors that place Montana youth at risk.

Survey results for each of the risk factors are presented in two parts:

- 1. an overview of the risk factor as it applies to Montana youth; and
- 2. highlights of the results of the 2003 YRBS for Montana students in alternative schools in bullet format.

Appendix A lists all survey questions and corresponding frequency distributions, while Appendix B contains graphs associated with the highlights presented in the text. Appendix C also contains charts of specific questions asked in the 2003 YRBS.



#### **II. SURVEY METHODS**

#### **DESCRIPTION OF YRBS**

The Youth Risk Behavior Survey (YRBS) was developed cooperatively by the Centers for Disease Control and Prevention (CDC), 19 other federal agencies, and state and local departments of education to measure the extent to which adolescents engage in health risk behaviors. The 2003 survey instrument consisted of 90 questions which assessed the six priority health risk behaviors which result in the greatest amount of morbidity, mortality, and social problems among youth. These behaviors include behaviors that result in intentional and unintentional injuries; tobacco use; alcohol and other drug use; sexual behaviors that result in HIV infection, other sexually transmitted diseases, and unintended pregnancies; physical inactivity; and dietary excesses and imbalances.

#### SAMPLE SELECTION PROCESS

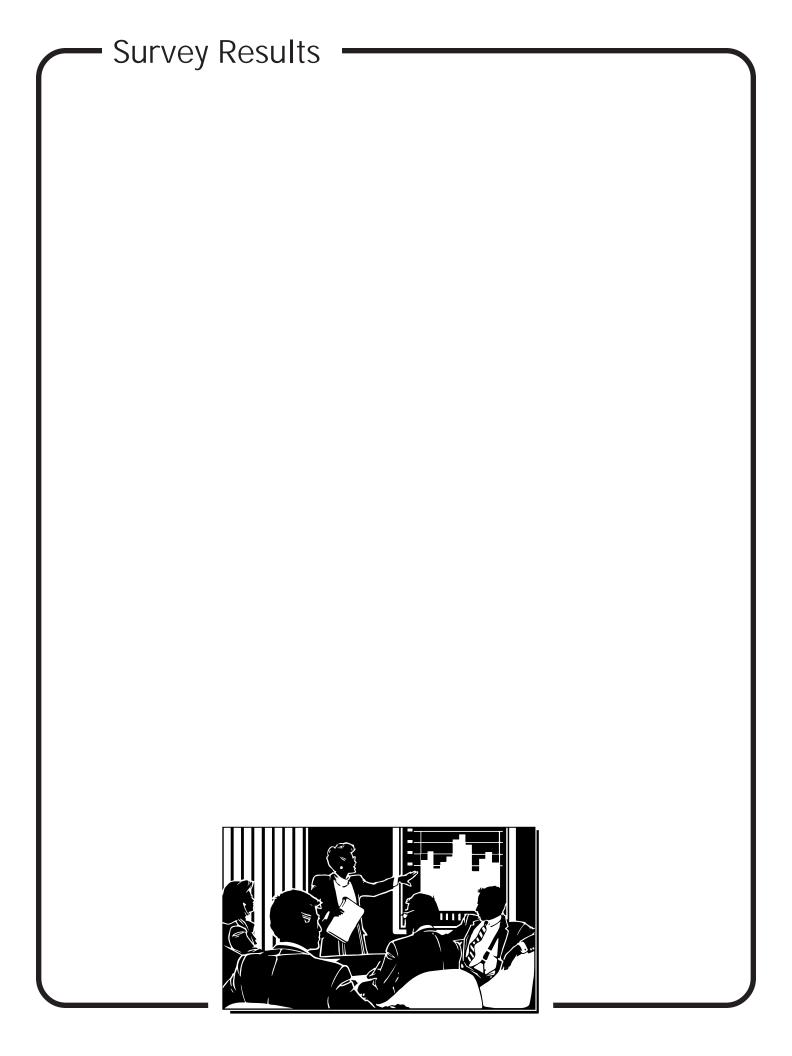
All alternative schools in Montana were eligible to be selected for inclusion in the sample. Ten schools elected to participate in the volunteer sample and 70 percent of the students in these schools volunteered to participate in the survey. A total of 373 alternative school students participated in the 2003 Montana YRBS. The results presented in this report are based on the behavior and opinion of the participants in the sample; because the survey was not random it is not possible to use the results of the survey to draw conclusions about health-risk behaviors of all alternative school students in Montana.

Superintendents of school districts were contacted during November 2002 to obtain approval to approach principals of randomly selected schools about the survey. Sufficient time was allowed to gain school board and/or parent approval, and to answer any questions about the survey. Each participating school submitted a list of second-period classes and a random set of these classes was selected and surveyed. In smaller schools, a census of students was attempted. Survey coordinators for each school were assigned by school administrators and packets of information, including instructions, survey booklets, and answer sheets, were mailed to each school during February 2003. Surveys were administered during second-period classes and returned to the Office of Public Instruction (OPI) for processing within one week of survey administration.

Teachers administering the survey to students were provided with detailed written instructions to ensure uniform survey administration across sites. To encourage accurate responses to sensitive questions, a strict protocol was implemented to **protect the privacy and confidentiality of all participating students**. Participation in the survey was voluntary. Students could decline to participate, turn in blank or incomplete survey forms, or stop completing the survey at any time. The protocols used in the YRBS ensure that participating schools are not violating any federal laws protecting students' rights and privacy, including the Protection of Pupil Rights Amendment and the Family Educational Rights and Privacy Act (FERPA).

#### **SURVEY VALIDITY AND LIMITATIONS**

The 2003 Youth Risk Behavior Survey for students in Montana alternative schools was not a random survey. It would not be valid to generalize the findings from this survey to all alternative school students in Montana. It is only valid to attribute the results of this survey to the 373 students who reported their behaviors in response to the items in the questionnaire. In addition, respondents in self-reported surveys may have a tendency to under-report behaviors that are socially undesirable, unhealthy, or illegal (alcohol consumption, drug use, seat belt nonusage, etc.) and overreport behaviors which are socially desirable (amount of exercise, etc.).



#### **III. SURVEY RESULTS**

#### INTENTIONAL AND UNINTENTIONAL INJURIES

#### Overview

Accidents are the leading cause of death among Montana youth aged 15 to 19 years old. The death rate for Montana teens 15 to 19, from accidents, homicide and suicide, was 81 per 100,000, compared to 51 per 100,000 nationally (Kids Count Survey, 2003). In 2001, 63 percent of deaths among youth aged 15 to 19 years old in Montana were attributed to accidents (Montana Department of Health and Human Services, 2001 Vital Statistics). Seventy-seven percent of these accidental deaths were due to motor vehicle crashes. The second leading cause of death among Montana youth in 2001 was suicide, which accounted for 26 percent of all deaths. Obviously, controlling or lowering the death rate due to these two causes, which account for over three-fourths of all deaths among Montana youth, would not only preserve Montana's most important resource, but also increase the social and economic well-being of the state and its population.

Eleven questions were asked of participants in the survey regarding intentional and unintentional injuries (see Appendix A). Questions related to intentional and unintentional injuries were developed for middle and high school students throughout the United States and, consequently, some of the questions may not relate well to youth in Montana. In particular, many Montana students may carry firearms for hunting or predator control and report that they are carrying a weapon -- even onto school property. The purpose for carrying these weapons may not have any relationship to self-protection or aggressive behavior as the survey was attempting to measure. However, this situation should not lessen the importance of firearm safety. Each year, Montana youth place themselves at risk for accidental injury or death when carrying firearms. The issue addressed in this survey is the access to firearms by Montana youth.

#### Highlights of the survey related to intentional and unintentional injuries

- In 2003, 38 percent of all alternative school respondents reported "Never or Rarely" wearing seat belts when riding in a car driven by someone else. Approximately 17 percent of alternative school respondents wear seat belts all the time (Figure 1, Appendix B).
- Approximately 54 percent of the respondents, within the 30 days prior to the survey, rode in a car driven by someone who had been drinking. Within 30 days prior to the survey, nearly one in three (31 percent) of the survey participants had driven a car when they had been drinking alcohol (Figure 1, Appendix B).
- In the past 12 months, 32 percent of the survey participants had seriously considered attempting suicide and 80 percent of those considering suicide had actually made a plan

to attempt suicide. Twenty percent of the students taking the survey reported that they had actually attempted suicide (Figure 1, Appendix B).

- During the past 12 months, 52 percent of alternative school survey respondents reported being in a physical fight. Approximately 30 percent had been in two or more fights within the past 12 months (Figure 1, Appendix B).
- In 2003, 15 percent of alternative school male respondents reported "Always" wearing seat belts, whereas 18 percent of the female alternative school respondents "Always" wore seat belts. The 2003 figures represent 2 to 3 percent increases over the 2001 rate (Figure 2, Appendix B).
- Fifty-four percent of the alternative school respondents reported that, within the 30 days prior to the survey, they had ridden in a car driven by someone who had been drinking (Figure 3, Appendix B).
- Of those alternative school students riding in a car driven by someone who had been drinking (54 percent), approximately one in five (19 percent) indicated that, within the 30 days prior to the survey, they had ridden six or more times in a vehicle driven by someone who had been drinking (Figure 3, Appendix B).
- Thirty-one percent of alternative school respondents reported that, within the 30 days prior to the survey, they had driven a car after drinking alcohol (Figure 4, Appendix B).
- Of those alternative school students reporting that they had been driving and drinking (31 percent), approximately one in seven (15 percent) reported drinking and driving six or more times in the 30 days prior to the survey (Figure 4, Appendix B).
- Alternative school males were more likely to have been involved in a physical fight than females (Figure 5, Appendix B).
- In the past year, 9 percent of alternative school survey respondents reported having been injured in a physical fight (Figure 5, Appendix B).
- In 2003, physical fighting and injuries from fighting among Montana alternative school students declined by 6 percentage points from the 2001 rate.
- Thirty-two percent of alternative school respondents reported seriously considering attempting suicide (Figure 6, Appendix B).
- Alternative school females were more likely to consider and attempt suicide than males (Figure 6, Appendix B).

#### **TOBACCO USE**

#### **Overview**

In 2001, an estimated 21.9 percent of adult Montanans reported being current smokers (Montana Department of Public Health and Human Services, Behavioral Risk Factor Surveillance System (BRFSS), 2001). Approximately one out of every five deaths in Montana can be attributed to tobacco use, as each year over 1,400 Montanans die prematurely from tobacco-related illnesses. The estimated annual cost of direct medical expenses related to smoking in Montana in 1998 was \$216 million (CDC, State Tobacco Control Highlights, 2002). Eighty percent of people who use tobacco start smoking or using smokeless tobacco before age 18, thus making nicotine addiction a disease that begins in childhood (U.S. Department of Health and Human Services, 1994).

Eleven questions were asked of Montana alternative school students regarding the use of tobacco (Appendix A). The questions related to frequency and use of both cigarettes and smokeless tobacco. In addition, several questions were asked about the use of tobacco products on school property.

#### Highlights of the survey related to tobacco use

- Ninety-two percent of alternative school students have tried smoking. Seventy percent smoked cigarettes on one or more days in the month prior to taking the survey (Figure 7, Appendix B).
- Fifty-nine percent of alternative school students reported that they smoked two or more cigarettes on the days they smoked (Figure 7, Appendix B).
- In 2003, 15 percent of alternative school students reported using chewing tobacco, significantly less than in 2001 (Figure 7, Appendix B).
- Seventy percent of alternative school students reported that they are current smokers, i.e., that they have smoked in the past 30 days. The rate in 2001 was 74 percent of survey respondents (Figure 8, Appendix B).
- During the past 12 months, 72 percent of alternative school students who smoked, indicated that they had tried to quit smoking cigarettes.
- Twenty-four percent of the male alternative school respondents reported having used chewing tobacco or snuff during the 30 days prior to the survey as compared to 7 percent of the females. In 2003 the number of male students using chewing tobacco declined by 3 percentage points from the 2001 rate (Figure 8, Appendix B).

#### **ALCOHOL AND DRUG ABUSE**

#### Overview

Excessive alcohol consumption contributes to cirrhosis of the liver, motor vehicle and other accidents, suicides, homicides, and some types of cancer. Traffic accidents involving drinking historically have been and continue to be a major problem in Montana. Alcohol related crashes tend to result in more severe injuries than do crashes with no alcohol involvement. During the early 1980s, fatalities related to alcohol accounted for as much as 62 percent of all fatalities. In 2002, alcohol related fatalities were at 35.7 percent (Montana Department of Transportation, 2003). In 2002, 20 percent of adult Montanans were classified as being at risk from binge drinking (i.e., consuming five or more drinks on one occasion in the past 30 days) (Montana Department of Health and Human Services, 2002 BRFSS survey results). A large proportion of this group indicated that they began drinking in high school.

Nineteen questions were asked of Montana alternative school students regarding their use of alcohol and drugs (Appendix A). The questions related to frequency of use, age of first use, and types and forms of drugs used.

#### Highlights of the survey related to alcohol and drug abuse

- Seventy-three percent of alternative school students had at least one drink of alcohol during the 30 days prior to the survey. Of those students who had a drink of alcohol, 17 percent were less than nine years old when they had their first drink (Appendix A and Figure 9, Appendix B).
- Sixty-four percent of alternative school respondents had used marijuana one or more times during the 30 days prior to the survey. In 2003, alternative school students reported the median age of first use of marijuana was 11 to 12 years old, which was similar to the age reported in the 2001 YRBS (Appendix A and Figure 9, Appendix B).
- Nearly one in two (43 percent) of alternative school respondents reported using cocaine at least once during their lifetime (Figure 10, Appendix B).
- Sixty-seven percent of the alternative school students reported that they had five or more drinks in a row at least once during the past 30 days (Figure 10, Appendix B).
- Eighty-eight percent of alternative school students reported smoking marijuana at least once in their lifetimes. Female students were slightly more likely to have used marijuana than male students (Figure 10, Appendix B).
- Forty-six percent of alternative school students indicated that they have used methamphetamines (also called speed, crystal, crank, or ice).

#### YOUTH SEXUAL BEHAVIORS

#### **Overview**

Nationally, half of all high school students have had sexual intercourse, reflecting a *decline* during the last decade from 54 percent in 1991 to 45.6 percent in 2001. Males are slightly more likely than females to report having had sex (The Centers for Disease Control and Prevention, Youth Risk Behavior Trends). In addition, the teen birthrate has declined steadily since 1991. Nationally, the 2000 rate of 48.7 births per 1,000 females aged 15-19 is a record low and is 22 percent lower than the 1991 rate of 62.1. Montana teen birth rates have decreased from 47 births per 1,000 females aged 15-19 in 1991 to 36 births per 1,000 females in 2000 (Montana DPHHS Vital Statistics, 2000).

Eight questions were asked of Montana alternative school students regarding their sexual activity (Appendix A). Questions related to frequency, numbers of partners, abstinence, alcohol use, and birth control.

#### Highlights of the survey related to youth sexual behaviors

- Sixteen percent of alternative school respondents reported not having had sexual intercourse. This represents a slight increase over the 2001 and 1999 figures (Figure 11, Appendix B).
- Eighty-eight percent of alternative school students have had HIV/AIDS education (Figure 11, Appendix B).
- Fifty-one percent of alternative school survey respondents have had sexual intercourse with four or more people during their life (Figure 11, Appendix B).
- Forty-nine percent of the sexually active alternative school survey respondents reported wearing a condom during their last sexual intercourse. One-fifth (19 percent) did not use any method to prevent pregnancy.
- Eighty-four percent of alternative school survey respondents reported having had sexual intercourse in their lifetime. Twenty-one percent of the survey respondents reported that they had sexual intercourse within the three-month period prior to the survey.
- Alternative school females were more likely to report having had sexual intercourse than males (Figure 12, Appendix B).
- Eighty-eight percent of alternative school survey respondents who have had sexual intercourse reported having had sex with multiple (two or more) partners. Female students were more likely to have had multiple partners than males (Figure 13, Appendix B).

- Forty-four percent of alternative school survey respondents who have had sexual
  intercourse reported using alcohol or drugs the last time they had sex. Male students
  were slightly more likely to have used alcohol or drugs before sexual intercourse (Figure
  13, Appendix B).
- Fifty-one percent of alternative school survey respondents who have had sexual
  intercourse reported <u>not</u> using a condom the last time they had sex (Figure 13, Appendix
  B).

#### PHYSICAL INACTIVITY

#### **Overview**

Inadequate physical activity behaviors established during youth may extend into adulthood and increase risk for coronary heart disease, hypertension, non-insulin dependent diabetes, osteoporosis, obesity, and mental health problems. In 2001, 22 percent of adult Montanans reported "no leisure time physical activity," 49 percent are at risk for not meeting the moderate physical activity recommendations of Healthy People 2010 (i.e., 30 minutes of activity, five or more times a week) and 76 percent are at risk for not meeting vigorous physical activity recommendations of Healthy People 2010 (i.e., 20 or more minutes of activity, three or more times a week, at 50 percent or more capacity) (Montana Department of Public Health and Human Services, 2001 BRFSS survey results).

Seven questions were asked of Montana alternative school students regarding physical inactivity (Appendix A). The questions related to types of physical activity as well as frequency of activity.

#### Highlights of the survey related to physical inactivity

- Only one of every four (27 percent) Montana alternative school students played on one
  or more sports teams during the past 12 months. Twenty-three percent of alternative
  school students attended physical education classes daily (Figure 14, Appendix B).
- Nearly one-half (49 percent) of alternative school students watch TV two or more hours per day (Figure 14, Appendix B).
- Thirty-four percent of alternative school students did strengthening exercises in three of the past seven days prior to the survey (Figure 14, Appendix B).

#### **DIETARY EXCESSES AND IMBALANCES**

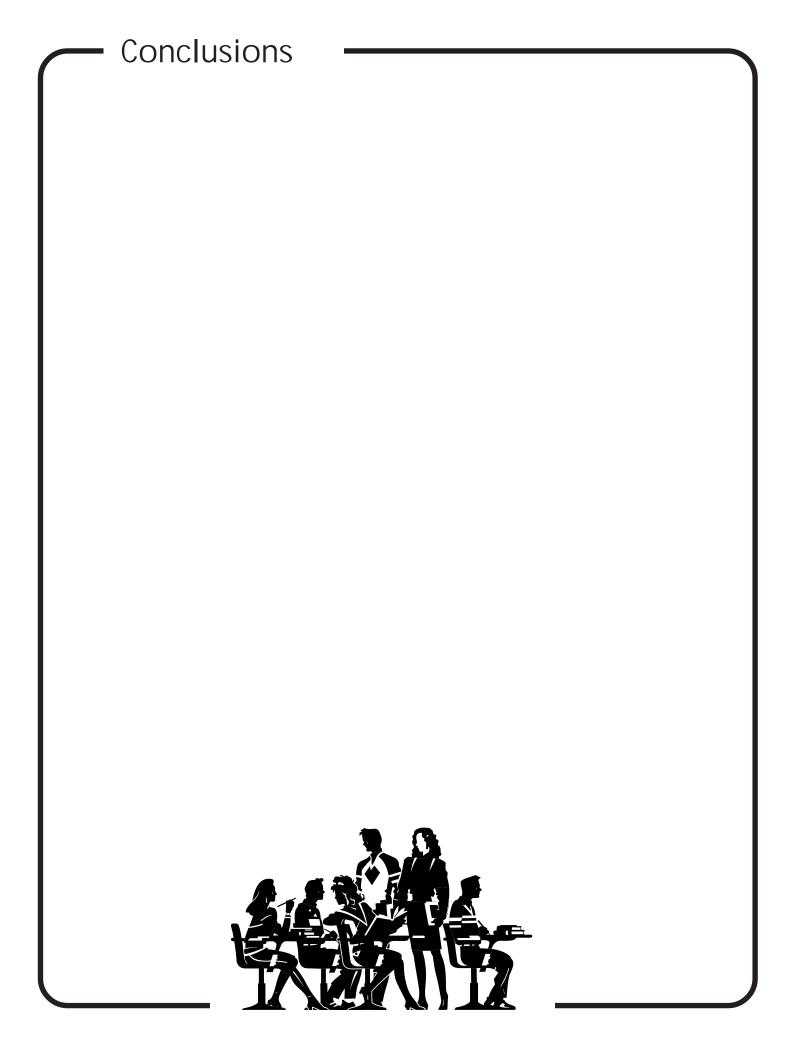
#### **Overview**

Evidence suggests that approximately 33 percent of all cancer deaths in the United States are related to dietary factors (American Cancer Society, Cancer Facts and Figures, 2002). Using this average, in Montana an estimated 633 of the total 1,900 cancer deaths for the year 2002 were related to dietary excesses and imbalances. In addition, 21 percent of Montana youth live in poverty and thus are at risk for hunger. Montana ranked 39th among the 50 states for the percent of children living in poverty. (Kids Count Survey, 2003). In Montana, 42,912 children, or 2 in 10, were living in poverty (Children's Defense Fund, 2003).

Seven questions were asked of Montana alternative school students regarding dietary excesses and imbalances (Appendix A). The questions related to types of food the youth were eating as well as frequency.

#### Highlights of the survey related to dietary excesses and imbalances

- One-half (50 percent) of alternative school students think they are "about the right weight." More boys tend to think they are at about the right weight than girls (Figure 15, Appendix B).
- Fifty-eight percent of alternative school girls are trying to lose weight. Only 25 percent of the boys reported that they are trying to lose weight (Figure 15, Appendix B).
- Seventy-eight percent of alternative school student respondents reported eating fruit at least once during the seven days prior to the survey. Fifty-nine percent ate a green salad within the past seven days (Figure 15, Appendix B).



#### IV. CONCLUSIONS AND RECOMMENDATIONS

Results of the 2003 Montana Alternative School Youth Risk Behavior Survey indicate that although progress has been made over the past several years in decreasing risk from undesirable behaviors, Montana health, education, and social professionals need to continue to focus on those primary risk behaviors that cause the greatest amount of mortality, morbidity, and social problems among Montana youth. These primary risk behaviors are initiated during adolescence, yet the consequences of unhealthy behaviors are exhibited from adolescence through adulthood. For example, youth may start smoking in their early teens, but complications such as emphysema do not appear until adulthood.

Important risk behaviors where improvement will be needed in order for Montana to meet current health objectives are:

- Seat belt usage -- only 17 percent of Montana alternative school youth wear seat belts all of the time when riding in a car driven by someone else. While this level of usage is a marked increase over the 1999 and 2001 level of 13 percent, it is still far short of the current objective for seat belt use of 85 percent of all occupants wearing seat belts all of the time.
- **Bicycle helmet usage** -- only 2 percent of alternative school bicyclists reported using helmets *all* of the time. The current objective is for 50 percent of bicyclists to use helmets.
- **Vehicle-related mortality** -- the motor vehicle accident mortality rate among Montana alternative school youth is approximately 55 per 100,000 people. The current objective is to reduce deaths caused by motor vehicles to 33 per 100,000.
- Injurious suicide attempts -- the number of injurious suicide attempts reported by Montana alternative school youth was approximately the same in 2003 as in 1999 and 2001 (30 per 1,000 people). The YRBS data showed little difference between 2003 and 2001 in the percent of students who actually attempted suicide, and Montana remains fifth highest in the nation in the rate of completed adolescent suicides. The current objective is to reduce the incidence of injurious attempts by 15 percent among adolescents aged 14-17.
- Smokeless tobacco use -- Montana alternative school youth are continuing to use smokeless tobacco products at rates that are higher than national trends. In 2003, 24 percent of Montana males and 7 percent of females in alternative schools used snuff or chewing tobacco in the 30 days prior to the survey. The rate for males is somewhat lower than the 2001 rate (27 percent) while the number of females who use smokeless tobacco also decreased by one percent. The current objective is to reduce usage for males aged 12-24 to no more than 4 percent.

- Alcohol usage in 2003 the alternative school YRBS indicates that approximately 73 percent of Montana alternative school youth had used alcohol in the month prior to the survey. The current objective is to reduce alcohol intake to 12.6 percent of youth aged 12-17 and to 29 percent of youth aged 18-20.
- Marijuana usage -- the 2003 YRBS indicates that 64 percent of Montana youth in alternative schools had used marijuana during the 30 days prior to the survey. This rate is about 2 percentage points higher than the rate reported in 2001. The current objective is to reduce the use of marijuana in the past month to 3.2 percent for the age group that includes alternative school students.
- Sexual behavior -- the 2003 alternative school YRBS indicates that 84 percent of Montana alternative school youth had engaged in sexual intercourse. The current objective is to reduce this rate to 15 percent for those aged 15 years or less.

There is still much to do to achieve the national health objectives for the reported health-risk behaviors of alternative school youth. Although reported behaviors related to the risk behaviors of driving while drinking, riding with a drinking driver, suicide attempts, fighting, smoking, alcohol and other drug use, sexual behaviors, and physical activity have shown some improvement since 1999, a long-term, comprehensive approach to improving health and reducing risks is needed to provide Montana's alternative school youth with healthier lives further removed from the illness, death and social problems linked to preventable health risks.

There are several areas where Montana appears to be meeting or exceeding national objectives:

- Montana schools continue to provide HIV/AIDS education to its young people. About 88 percent of Montana alternative school youth indicated they have received education related to HIV/AIDS infection.
- Over 34 percent of Montana alternative school youth regularly perform physical activities that enhance and maintain muscular strength, muscular endurance, and muscular flexibility. The current objective is to increase the national rate to 40 percent.

In order for Montana to help develop youth who will become healthy, responsible adults and to meet the current health objectives, the following recommendations are set forth:

1. Ensure that comprehensive health education and programs are implemented at adequate levels to continue to educate alternative school youth. Comprehensive school health programs and policies that support what is taught in the Health Enhancement classroom encourage long-term healthy lifestyles. Going beyond the classroom (e.g., drug-free and tobacco-free schools) involves the community and other agencies in the health of its young people. There is no greater tool for changing behavior patterns than

effective, skills-based, age-appropriate health education. If Montana alternative school youth are to change risk behaviors, they will need to have full understanding of the positive aspects of healthy behaviors, as well as the negative consequences of unhealthy behaviors.

#### Other comprehensive recommendations include:

- Communities should be encouraged to provide for developmentally appropriate preschool programs that help prepare children for school, thereby improving the prospects with regard to school performance, problem behaviors and physical health.
- Montana students should have daily access to and participation in health enhancement classes.
- Montana schools should be encouraged to provide programs for parents such as parenting skills and encourage parents to talk to their children regarding health issues.
- Montana schools should consider programs that provide students who are in need
  of social and health services either the services or proper referrals to services (i.e.,
  "full-service schools" or "school-linked services").
- Montana schools should have policies and programs in place that encourage school completion for all students and reduce the incidence of school dropouts.
- Montana schools should provide for all students guidance counselors who are properly prepared to deal with student issues.
- 2. Comprehensive health education and life management skills should be taught in all schools at appropriate age and developmental levels.
- 3. The effectiveness of comprehensive health education programs needs to be evaluated and, if necessary, modified in order to meet current health education objectives.
- 4. Improve the behavior patterns of Montana alternative school youth in the following areas:
  - increasing seat belt and helmet use,
  - reducing alcohol use,
  - reducing marijuana use,

- reducing use of tobacco products, especially smokeless tobacco, by young males and females, and
- increasing the number of youth who abstain from sexual intercourse, delaying the
  age of first sexual intercourse, increasing the number of sexually active youth who
  choose to reestablish abstinence from sexual intercourse, recognizing that there are
  youth who are sexually active, and increasing the use of condoms among sexually
  active youth.
- 5. Continue to address significant health-risk behaviors through prevention efforts that include the following concepts:

#### Intentional and Unintentional Injuries

Montana students should have access to and participate in accident prevention education, suicide prevention education and violence prevention education programs such as peer mediation and/or conflict resolution.

Montana schools should provide policies for staff and students that encourage safe, disciplined and drug-free environments.

#### Tobacco Use

Montana students should have access to and participate in tobacco education and prevention programs, including smokeless tobacco, at all grade levels.

Montana schools should be tobacco-free.

#### Alcohol and Drug Use

Montana students should have access to and participate in alcohol education and prevention programs at all grade levels.

Montana students should have access to and participate in bicycle/pedestrian safety and driver education programs at appropriate levels.

#### Sexuality

Montana students should have access to and participate in age-appropriate human sexuality education as part of a comprehensive school health program or as part of a family or faith-based structured program in line with family and community values.

#### Physical Inactivity

Montana students should engage in vigorous physical activity that promotes the development and maintenance of cardiorespiratory fitness three or more days per week for 20 or more minutes per occasion.

#### Nutrition

Montana students should have access to lunch and breakfast services in the home or at school that are consistent with the nutritional principles in the "Dietary Guidelines for Americans."

Nutrition education should be part of a comprehensive school health program at all grades. Ongoing education on safe weight management practices and acceptance of body size differences in alternative school youth should be a part of nutrition education.

- 6. Continue collaborative efforts involving state and local agencies (both public and private) to ensure that health behavior risks of alternative school youth are addressed in a coordinated manner. Meeting the health and safety needs of adolescents requires coordinated efforts involving schools, communities, health services and parents.
- 7. Continue the support of comprehensive health education and programs by school boards, school administrators, teachers, health service agencies, legislators, and parents.
- 8. Continue to monitor alternative school youth behavior patterns using the Youth Risk Behavior Survey (YRBS) instrument developed through the U.S. Public Health Service, Centers for Disease Control and Prevention.



#### REFERENCES

American Psychiatric Association. <u>Diagnostic and Statistical Manual of Mental Disorders</u>, 4th ed. Washington, D.C. American Psychiatric Association, 1987.

Blanken, A.J. Measuring use of alcohol and other drugs among adolescents. <u>Public Health</u> <u>Reports</u> 108(1):25-30, 1993.

Centers for Disease Control. Years of potential life lost before age 65: United States, 1987. Morbidity and Mortality Weekly Report 38:27-27, 1989.

Centers for Disease Control. Smoking-attributable mortality and years of potential life lost-United States, 1988. Morbidity and Mortality Weekly Report 40:62-63, 69-71, 1991.

Division of Sexually Transmitted Diseases/HIV Prevention. <u>Annual Report, 1991</u>. Center for Prevention Services, Centers for Disease Control and Prevention, U.S. Public Health Service, 1992.

Dryfoos, J.G. (1987). Working paper on youth at risk: One in four in jeopardy. Hastings on the Hudson, New York. Report submitted to the Carnegie Corporation.

Dryfoos, J.G. (1990). Adolescents at risk: Prevalence and prevention. New York. Oxford.

Eggert, L.L., Seyl, C.D., & Nicholas, L.J. (1990). Effects of a school-based prevention program for potential high school dropouts and drug abusers. <u>The International Journal of Addictions</u>, 25(7), 773-801.

Florida Department of Education (1992). <u>1991 Florida Youth Risk Behavior Survey Report.</u> Prevention Center. Tallahassee, FL.

Gortmaker, S.L., Dietz, W.H., Sobol, A.M., & Wehler, C.A. (1987). Increasing pediatric obesity in the United States. <u>American Journal of Diseases of Children</u>, 141, 535-540.

Gray, D.Z. (1990). <u>1990 surveillance report</u>. Report prepared in conjunction with the evaluation of the Montana Office of Public Instruction, AIDS Education Program. Helena, MT. Office of Public Instruction.

Harris, S.S., Caspersen, C.J., DeFriese, G.H., & Estes, E.H. (1989). Physical activity counseling for healthy adults as a primary preventive intervention in the clinical setting. <u>JAMA</u>, 261, 3590-3598.

Henshaw, S.K., and VanVort, J. Teenage abortion, birth and pregnancy statistics: an update. <u>Family Planning Perspective</u> 21:85-88, 1989.

Herzog, D., and Copeland, P. Eating disorders. <u>New England Journal of Medicine</u> 313:295-303, 1985.

Hofferth, S.L., & Hayes, C.D. (Eds.) (1987). <u>Risking the future: Adolescent sexuality, pregnancy, and childbearing</u>. Panel on Adolescent Pregnancy and Childbearing, Committee on Child Development Research and Public Policy, Commission on Behavioral and Social Sciences and Education, National Research Council. Washington, D.C. National Academy Press.

Johnston, L.D., O'Malley, P.M., & Bachman, J.G. (1989). <u>Drug use, drinking, and smoking:</u> <u>National survey results from high school, college, and young adult populations, 1975-1988</u> (DHHS Publication No. ADM 89-1638). Rockville, MD. National Institute of Drug Abuse.

Johnston, L.D., O'Malley, P.M., and Bachman, J.G. <u>National Trends in Drug Use and Related Factors Among American High School Students and Young Adults, 1975-1986</u>. DHHS Pub. No. (ADM)87-1535. Rockville, MD: National Institute on Drug Abuse, 1987.

Loftin, C., McDowall, D., Wiersema, B., and Cottrey, T.J. Effects of restrictive licensing of handguns on homicide and suicide in the District of Columbia. <u>New England Journal of Medicine</u> 325:1615-1620, 1991.

Luckenbill, D.F. Criminal homicide as a situated transaction. Social Problems 25:176-186, 1977.

Marinek, T.J., Cheffers, J.T.F., Zaichkowsky, L.D. Physical activity, motor development, and self-concept: race and age differences. <u>Perceptual and Motor Skills</u> 46:147-154, 1978.

Mitchell, J., and Eckert, E. Scope and significance of eating disorders. <u>Journal of Consulting</u> Clinical Psychology 55:628-634, 1987.

Montana Department of Health and Environmental Sciences (1993). <u>2001 Montana Behavioral Health Risk Survey</u>. Helena, MT.

Montana Department of Health and Environmental Sciences (2000). <u>2001 and 2000 Montana Vital Statistics</u>. Helena, MT.

Montana Hunger Coalition (1993). <u>Tufts University study reiterates seriousness of child hunger in Montana</u>. Coalition Newsletter. Helena, MT.

Montana Office of Public Instruction (1999). <u>1999 Montana Youth Risk Behavior Survey</u>. Helena, MT.

Montana Office of Public Instruction (2001). <u>2001 Montana Youth Risk Behavior Survey</u>. Helena, MT.

Morris, L., Warren, C.W., and Aral, S.O. Measuring adolescent sexual behaviors and related health outcomes. Public Health Reports 108(1):31-36, 1993.

National Center for Health Statistics (1990b). <u>Prevention profile. Health, United States, 1989</u> (DHHS Publication No. 90-1232). Hyattsville, MD. U.S. Department of Health and Human Services.

National Center for Health Statistics (1990a). <u>Health United States, 1989</u> (DHHS Publication No. 90-1232). Hyattsville, MD. U.S. Department of Health and Human Services. National Center for Health Statistics. Advance report of final mortality statistics, 1991. <u>Monthly Vital Statistics Report</u> 42(2):supplement, 1993.

National Committee for Injury Prevention and Control (1989). Injury Prevention: Meeting the Challenge. <u>Supplement to American Journal of Preventive Medicine</u>, <u>5</u>(3).

National Highway Traffic Safety Administration (1980). <u>A report to the Congress on the effect of motorcycle helmet use law repeal: A case for helmet use</u>. Washington, D.C. Department of Transportation.

National Highway Traffic Safety Administration (1988). <u>Fatal accident reporting system, 1987</u>. Washington, D.C. Department of Transportation.

National Highway Traffic Safety Administration (1987). The economic cost to society of motor vehicle accidents (Technical Report DOT HS 809-195). Washington, D.C. U.S. Department of Transportation.

O'Carroll, P.W., and Smith, J.A. Suicide and homicide. In: Wallace, H.M., Ryan, G., and Oglesby, A.C., eds. <u>Maternal and Child Health Practices</u>. Oakland, CA: Third Party Publishing, 583-597, 1988.

Office of Smoking and Health (1989). Reducing the health consequences of smoking: 25 years of program. A report of the Surgeon General (DHHS Publication No. CDC 89-8411). Washington, D.C. U.S. Department of Health and Human Services.

Paffenbarger, R.S., Hyde, R.T., Wing, A.L., & Hsieh, C.C. (1986). Physical activity, all cause mortality, and longevity of college alumni. New England Journal of Medicine, 314, 605-613.

Perrine, M., Peck, R., & Fell, J. (1988). Epidemiological perspectives on drunk driving. In <u>Surgeon General's Workshop on Drunk Driving: Background Papers</u>. Washington, D.C. U.S. Department of Health and Human Services.

Powell, K.E., Caspersen, C.J., Koplan, J.P., and Ford, E.S. Physical activity and chronic diseases. <u>American Journal of Clinical Nutrition</u> 49:999-1006, 1989.

Public Health Service. <u>Healthy People 2000: National Health Promotion and Disease Prevention Objectives-Full Report, With Commentary.</u> DHHS Pub. No. (PHS)91-50212. Washington, DC: U.S. Department of Health and Human Services, 1991.

Public Health Service (1986). <u>The health consequences of using smokeless tobacco: A report of the advisory committee to the Surgeon General</u> (NIH Publication No. 86-2874). Bethesda, MD. U.S. Department of Health and Human Services.

Public Health Service (1988). <u>The Surgeon General's report on nutrition and health</u> (DHHS Publication No. 88-50210). Washington, D.C. U.S. Department of Health and Human Services.

Rivara, F.P. (1985). Traumatic deaths of children in the United States: Currently available prevention strategies. <u>Pediatrics</u>, <u>75(3)</u>, 456-462.

Rotatori, A.F., & Fox, R.A. (1989). <u>Obesity in children and youth: Measurement, characteristics, causes, and treatment.</u> Springfield, IL. Charles C. Thomas.

Select Panel for the Promotion of Child Health (1981). Report to the United States conference and the secretary of health and human services: Vol. I. Major findings and recommendations & Vol. IV. Background papers (DHHS Publication No. PHS79-55071). Washington, D.C. U.S. Government Printing Office.

Sloan, J.H., et. al. Handgun regulations, crime, assaults, and homicide: a tale of two cities. <u>New England Journal of Medicine</u> 319:1256-1262, 1988.

Sosin, D.M., Sacks, J.J., and Holmgren, P. Head injury-associated deaths from motorcycle crashes. <u>Journal of the American Medical Association</u> 264:2395-2399, 1990.

South Dakota Department of Education and Cultural Affairs (1992). <u>South Dakota Youth Risk</u> <u>Behavior Survey Report 1992</u>. Pierre, SD.

Stein, R.F. Comparison of Self-concept of nonobese and obese university junior female nursing students. <u>Adolescence</u> 22:77-90, 1987.

Thompson, R.S., Rivara, F.P.O., & Thompson, D.C. (1989). A case-control study of the effectiveness of bicycle safety helmets. New England Journal of Medicine, 320(21), 1364-1366.

- U.S. Department of Health and Human Services. <u>Preventing Tobacco Use Among Young People: A Report of the Surgeon General</u>. Washington, D.C.: U.S. Government Printing Office, 1994.
- U.S. Department of Health and Human Services (1990). <u>Healthy people: National healthy promotion and disease prevention objectives</u>. U.S. Department of Health and Human Services, Public Health Service, Conference Edition, September.
- U.S. Department of Health and Human Services (1990). <u>Prevention '89/'90: Federal programs and progress</u>. Washington, D.C. U.S. Government Printing Office.

- U.S. Department of Health and Human Services (1987). National children and youth fitness study II. Journal of Physical Education, Recreation, and Dance, 58, 50-96.
- U.S. Department of Health and Human Services. <u>Prevention '89/'90: Federal Programs in Progress</u>. Washington, D.C. U.S. Government Printing Office, 1990.
- U.S. Department of Health and Human Services. National children and youth fitness study II. Journal of Physical Education, Recreation and Dance 58:50-96, 1987.
- U.S. Department of Health and Human Services (1985). National children and youth fitness study. <u>Journal of Physical Education</u>, <u>Recreation</u>, <u>and Dance</u>, <u>56</u>, 44-90.
- Westoff, C.F. (1988). Contraceptive paths toward reduction of unintended pregnancy and abortion. Family Planning Perspectives, 20(1), 413.
- Wood, N.P., Jr., & Mercy, J.A. (1988). Unintentional firearm related fatalities, 1970-1984. Morbidity and Mortality Weekly Report, 37(SS1), 47-52.

## APPENDIX A FREQUENCY DISTRIBUTIONS

## 2003 MONTANA YOUTH RISK BEHAVIOR SURVEY ALTERNATIVE SCHOOLS FREQUENCY DISTRIBUTIONS

The following frequency distributions are based upon surveys with 373 volunteer alternative school students in Montana during February of 2003. Frequency distributions may not total 373 due to non-response and percents may not total 100 percent due to rounding.

#### Q-1 How old are you?

		<u>Percent</u>
A.	12 years old or younger	1.1%
B.	13 years old	0.8%
C.	14 years old	4.3%
D.	15 years old	13.7%
E.	16 years old	20.6%
F.	17 years old	31.1%
G.	18 years old or older	28.4%

#### Q-2 What is your sex?

		<u>Percent</u>
Α.	Female	53.4%
B.	Male	46.6%

#### Q-3 In what grade are you?

	-	<u>Percent</u>
A.	9th Grade	11.9%
B.	10th Grade	19.5%
C.	11th Grade	32.5%
D.	12th Grade	32.5%
E.	Other	3.5%

#### Q-4 How do you describe yourself? (Select one or more responses.)

		Percent
A.	American Indian or Alaska Native	14.5%
B.	Asian	1.8%
C.	Black or African American	1.3%
D.	Hispanic or Latino	3.3%
E.	Native Hawaiian or Other Pacific Islander	1.1%
F.	White	81.2%

#### Q-5 During the past 12 months, how would you describe your grades in school?

		Fercent
A.	Mostly A's	12.0%
В.	Mostly B's	32.2%
C.	Mostly C's	28.9%
D.	Mostly D's	12.8%
E.	Mostly F's	4.6%
F.	None of these grades	0.8%
G.	Not sure	8.7%

Percent

#### Q-6 How tall are you without your shoes on?

		<u>Percent</u>
A.	Less than 4 ft	0.3%
B.	4 ft to 4 ft, 6 in	0.3%
C.	4 ft, 7 in to 5 ft	5.7%
D.	5 ft, 1 in to 5 ft, 6 in	40.8%
E.	Over 5 ft, 6 in	53.0%

#### Q-7 How much do you weigh without your shoes on?

		Percent
A.	Less than 90 lbs	1.9%
B.	90-99 lbs	1.4%
C.	100-109 lbs	6.5%
D.	110-119 lbs	10.3%
E.	120-129 lbs	10.6%
F.	133-139 lbs	12.7%
G.	140 lbs +	56.6%

The next 5 questions ask about personal safety.

#### Q-8 When you rode a bicycle during the past 12 months, how often did you wear a helmet?

		Percent
A.	I did not ride a bicycle during the past 12 months	40.0%
B.	Never wore a helmet	54.6%
C.	Rarely wore a helmet	1.9%
D.	Sometimes wore a helmet	1.1%
E.	Most of the time wore a helmet	1.1%
F.	Always wore a helmet	1.4%

#### Q-9 How often do you wear a seat belt when riding in a car driven by someone else?

		<u>Percent</u>
A.	Never	16.8%
B.	Rarely	21.5%
C.	Sometimes	23.4%
D.	Most of the time	21.5%
E.	Always	16.8%

### Q-10 During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?

	•	<u>Percent</u>
A.	0 times	46.2%
B.	1 time	14.2%
C.	2 or 3 times	21.3%
D.	4 or 5 times	7.9%
E.	6 or more times	10.4%

## Q-11 During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol?

		<u>Percent</u>
A.	0 times	68.8%
B.	1 time	12.5%
C.	2 or 3 times	12.0%
D.	4 or 5 times	1.9%
E.	6 or more times	4.7%

The next 10 questions ask about violence-related behaviors.

## Q-12 During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club?

		Percent
Α.	0 days	73.9%
В.	1 day	7.0%
C.	2 or 3 days	4.0%
D.	4 or 5 days	1.6%
E.	6 or more days	13.5%

#### Q-13 During the past 30 days, on how many days did you carry a gun?

		Percent
A.	0 days	92.4%
B.	1 day	1.9%
C.	2 or 3 days	2.2%
D.	4 or 5 days	0.5%
E.	6 or more days	3.0%

## Q-14 During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?

		<u>Percent</u>
A.	0 days	88.8%
B.	1 day	2.7%
C.	2 or 3 days	1.4%
D.	4 or 5 days	0.3%
E.	6 or more days	6.8%

## Q-15 During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?

		<u>Percent</u>
A.	0 days	91.6%
В.	1 day	3.2%
C.	2 or 3 days	2.2%
D.	4 or 5 days	0.3%
E.	6 or more days	2.7%

Q-16 During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?

		<u>Percent</u>
A.	0 times	89.2%
B.	1 time	4.3%
C.	2 or 3 times	3.5%
D.	4 or 5 times	0.8%
E.	6 or 7 times	0.8%
F.	8 or 9 times	0.0%
G.	10 or 11 times	0.5%
Н.	12 or more times	0.8%

## Q-17 During the past 12 months, how many times has someone stolen or deliberately damaged your property such as your car, clothing, or books on school property?

		Percent
A.	0 times	68.6%
B.	1 time	11.9%
C.	2 or 3 times	12.5%
D.	4 or 5 times	3.8%
E.	6 or 7 times	0.5%
F.	8 or 9 times	0.5%
G.	10 or 11 times	0.5%
Н.	12 or more times	1.6%

#### Q-18 During the past 12 months, how many times were you in a physical fight?

		Percent
A.	0 times	48.2%
B.	1 time	21.4%
C.	2 or 3 times	17.3%
D.	4 or 5 times	5.8%
E.	6 or 7 times	3.0%
F.	8 or 9 times	0.8%
G.	10 or 11 times	0.5%
Н.	12 or more times	3.0%

## Q-19 During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?

		<u>Percent</u>
A.	0 times	91.2%
B.	1 time	7.1%
C.	2 or 3 times	0.8%
D.	4 or 5 times	0.8%
E.	6 or more times	0.0%

Q-20 During the past 12 months, how many times were you in a physical fight on school property?

		Percent
A.	0 times	81.1%
B.	1 time	11.2%
C.	2 or 3 times	5.2%
D.	4 or 5 times	0.8%
E.	6 or 7 times	0.5%
F.	8 or 9 times	0.3%
G.	10 or 11 times	0.3%
Н.	12 or more times	0.5%

Q-21 During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?

		<u>Percent</u>
A.	Yes	21.6%
B.	No	78.4%

Q-22 Have you ever been physically forced to have sexual intercourse when you did not want to?

	<u>Percent</u>
A. Yes	23.0%
B. No	77.0%

The next 5 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

Q-23 During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

		Percent
A.	Yes	46.7%
B.	No	53.3%

Q-24 During the past 12 months, did you ever seriously consider attempting suicide?

		<u>i crocint</u>
A.	Yes	31.8%
B.	No	68.2%

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Q-25 During the past 12 months, did you make a plan about how you would attempt suicide?

		<u>r er c</u>	Jeiit
A.	Yes	25	.4%
B.	No	74	.6%

#### Q-26 During the past 12 months, how many times did you actually attempt suicide?

		reiceiii
A.	0 times	80.0%
B.	1 time	11.9%
C.	2 or 3 times	5.7%
D.	4 or 5 times	0.3%
E.	6 or more times	2.2%

Percent

### Q-27 If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?

		<u>Percent</u>
A.	I did not attempt suicide during the past 12 months	73.6%
B.	Yes	7.0%
C.	No	19.4%

#### The next 12 questions ask about tobacco use.

#### Q-28 Have you ever tried cigarette smoking, even one or two puffs?

	<u>Percent</u>
A. Yes	92.0%
B. No	8.0%

#### Q-29 How old were you when you smoked a whole cigarette for the first time?

		Percent
A.	I have never smoked a whole cigarette	12.5%
B.	8 years old or younger	14.8%
C.	9 or 10 years old	15.0%
D.	11 or 12 years old	25.3%
E.	13 or 14 years old	20.9%
F.	15 or 16 years old	8.9%
G.	17 years old or older	2.5%

#### Q-30 During the past 30 days, on how many days did you smoke cigarettes?

		<u>Percent</u>
A.	0 days	29.9%
B.	1 or 2 days	5.8%
C.	3 to 5 days	2.7%
D.	6 to 9 days	3.6%
E.	10 to 19 days	4.9%
F.	20 to 29 days	8.8%
G.	All 30 days	44.2%

### Q-31 During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

		<u>Percent</u>
A.	I did not smoke cigarettes during the past 30 days	29.4%
B.	Less than 1 cigarette per day	7.1%
C.	1 cigarette per day	4.7%
D.	2 to 5 cigarettes per day	22.3%
E.	6 to 10 cigarettes per day	19.8%
F.	11 to 20 cigarettes per day	13.5%
G.	More than 20 cigarettes per day	3.3%

### Q-32 During the past 30 days, how did you usually get your own cigarettes? (Select only one response.)

		<u>Percent</u>
A.	I did not smoke cigarettes during the past 30 days	30.4%
B.	I bought them in a store such as a convenience store,	
	supermarket, discount store, or gas station	22.7%
C.	I bought them from a vending machine	0.3%
D.	I gave someone else money to buy them for me	28.5%
E.	I borrowed (or bummed) them from someone else	9.9%
F.	A person 18 years old or older gave them to me	3.3%
G.	I took them from a store or family member	0.6%
Н.	I got them some other way	4.4%

## Q-33 During the past 30 days, on how many days did you smoke cigarettes on school property?

		<u>r ei ceilt</u>
A.	0 days	70.1%
B.	1 or 2 days	7.1%
C.	3 to 5 days	2.5%
D.	6 to 9 days	2.7%
E.	10 to 19 days	4.7%
F.	20 to 29 days	4.4%
G.	All 30 days	8.5%

## Q-34 Have you ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days?

	<u>Percent</u>
A. Yes	67.8%
B. No	32.2%

#### Q-35 During the past 12 months, did you ever try to quit smoking cigarettes?

		<u>Percent</u>
A.	I did not smoke during the past 12 months	27.1%
B.	Yes	52.2%
C.	No	20.7%

Q-36 During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?

		<u>Percent</u>
A.	0 days	85.1%
В.	1 or 2 days	6.2%
C.	3 to 5 days	2.4%
D.	6 to 9 days	1.6%
E.	10 to 19 days	1.1%
F.	20 to 29 days	1.4%
G.	All 30 days	2.2%

### Q-37 During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip on school property?

		<u>Percent</u>
A.	0 days	92.9%
B.	1 or 2 days	1.1%
C.	3 to 5 days	1.4%
D.	6 to 9 days	1.4%
E.	10 to 19 days	1.1%
F.	20 to 29 days	0.3%
G.	All 30 days	1.9%

### Q-38 During the past 30 days, on how many days did you smoke cigars, cigarillos, or little cigars?

		<u>reiceill</u>
A.	0 days	77.1%
B.	1 or 2 days	12.3%
C.	3 to 5 days	6.0%
D.	6 to 9 days	1.1%
E.	10 to 19 days	1.4%
F.	20 to 29 days	0.3%
G.	All 30 days	1.9%

Percent

The next 5 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

#### Q-39 During your life, on how many days have you had at least one drink of alcohol?

		<u>Percent</u>
A.	0 days	6.6%
B.	1 or 2 days	6.6%
C.	3 to 9 days	6.6%
D.	10 to 19 days	6.6%
E.	20 to 39 days	10.9%
F.	40 to 99 days	18.3%
G.	100 or more days	44.5%

#### Q-40 How old were you when you had your first drink of alcohol other than a few sips?

		Percent
A.	I have never had a drink of alcohol other than a few	6.8%
B.	8 years old or younger	15.8%
C.	9 or 10 years old	13.6%
D.	11 or 12 years old	22.0%
E.	13 or 14 years old	30.7%
F.	15 or 16 years old	8.7%
G.	17 years old or older	2.4%

#### Q-41 During the past 30 days, on how many days did you have at least one drink of alcohol?

		<u>Percent</u>
A.	0 days	27.5%
B.	1 or 2 days	18.0%
C.	3 to 5 days	16.3%
D.	6 to 9 days	19.1%
E.	10 to 19 days	13.1%
F.	20 to 29 days	3.0%
G.	All 30 days	3.0%

### Q-42 During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

	•	<u>Percent</u>
A.	0 days	33.2%
B.	1 day	11.6%
C.	2 days	13.7%
D.	3 to 5 days	17.3%
E.	6 to 9 days	15.9%
F.	10 to 19 days	4.9%
G.	20 or more days	3.5%

### Q-43 During the past 30 days, on how many days did you have at least one drink of alcohol on school property?

		<u>Percent</u>
A.	0 days	91.1%
В.	1 or 2 days	5.4%
C.	3 to 5 days	1.4%
D.	6 to 9 days	0.8%
E.	10 to 19 days	0.5%
F.	20 to 29 days	0.3%
G.	All 30 days	0.5%

#### The next 4 questions ask about marijuana use. Marijuana also is called grass or pot.

#### Q-44 During your life, how many times have you used marijuana?

		<u>Percent</u>
A.	0 times	11.9%
B.	1 or 2 times	4.6%
C.	3 to 9 times	5.1%
D.	10 to 19 times	4.9%
E.	20 to 39 times	9.2%
F.	40 to 99 times	6.8%
G.	100 or more times	57.5%

#### Q-45 How old were you when you tried marijuana for the first time?

		<u>Percent</u>
A.	I have never tried marijuana	11.1%
B.	8 years old or younger	8.7%
C.	9 or 10 years old	11.1%
D.	11 or 12 years old	24.2%
E.	13 or 14 years old	29.6%
F.	15 or 16 years old	13.3%
G.	17 years old or older	1.9%

#### Q-46 During the past 30 days, how many times did you use marijuana?

		<u> Percent</u>
A.	0 times	35.6%
B.	1 or 2 times	9.9%
C.	3 to 9 times	11.2%
D.	10 to 19 times	9.0%
E.	20 to 39 times	9.0%
F.	40 or more times	25.2%

#### Q-47 During the past 30 days, how many times did you use marijuana on school property?

		<u> Percent</u>
Α.	0 times	83.0%
B.	1 or 2 times	4.4%
C.	3 to 9 times	4.1%
D.	10 to 19 times	3.6%
E.	20 to 39 times	1.6%
F.	40 or more times	3.3%

#### The next 9 questions ask about other drugs.

## Q-48 During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?

			<u>Percent</u>
A.	0 times		57.3%
В.	1 or 2 times		14.2%
C.	3 to 9 times		9.3%
D.	10 to 19 times		6.0%
E.	20 to 39 times	A10	3.8%
F.	40 or more times		9.3%

### Q-49 During the past 30 days, how many times did you use any form of cocaine, including powder, crack, or freebase?

		<u>Percent</u>
A.	0 times	82.6%
B.	1 or 2 times	8.4%
C.	3 to 9 times	4.1%
D.	10 to 19 times	3.0%
E.	20 to 39 times	1.1%
F.	40 or more times	0.8%

### Q-50 During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

		<u>Percent</u>
A.	0 times	72.3%
B.	1 or 2 times	12.0%
C.	3 to 9 times	7.9%
D.	10 to 19 times	4.1%
E.	20 to 39 times	1.6%
F.	40 or more times	2.2%

### Q-51 During the past 30 days, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

		Percent
A.	0 times	93.0%
B.	1 or 2 times	4.8%
C.	3 to 9 times	0.8%
D.	10 to 19 times	0.5%
E.	20 to 39 times	0.0%
F.	40 or more times	0.8%

### Q-52 During your life, how many times have you used heroin (also called smack, junk, or China White)?

		<u>Percent</u>
A.	0 times	91.1%
B.	1 or 2 times	5.7%
C.	3 to 9 times	0.8%
D.	10 to 19 times	0.8%
E.	20 to 39 times	0.8%
F.	40 or more times	0.8%

### Q-53 During your life, how many times have you used methamphetamines (also called speed, crystal, crank, or ice)?

		<u>Percent</u>
A.	0 times	54.1%
B.	1 or 2 times	13.4%
C.	3 to 9 times	9.3%
D.	10 to 19 times	5.7%
E.	20 to 39 times	4.9%
F.	40 or more times	12.6%

#### Q-54 During your life, how many times have you used ecstasy (also called MDMA)?

		Percent
A.	0 times	73.7%
В.	1 or 2 times	14.6%
C.	3 to 9 times	7.0%
D.	10 to 19 times	2.4%
E.	20 to 39 times	0.8%
F.	40 or more times	1.4%

### Q-55 During your life, how many times have you taken steroid pills or shots without a doctor's prescription?

		<u>Percent</u>
A.	0 times	89.4%
B.	1 or 2 times	4.1%
C.	3 to 9 times	3.0%
D.	10 to 19 times	0.8%
E.	20 to 39 times	1.4%
F.	40 or more times	1.4%

### Q-56 During your life, how many times have you used a needle to inject any illegal drug into your body?

_		<u>Percent</u>
A.	0 times	91.6%
B.	1 time	3.5%
C.	2 or more times	4.9%

### Q-57 During the past 12 months, has anyone offered, sold, or given you an illegal drug on school property?

		<u>Percent</u>
A.	Yes	46.6%
B.	No	53.4%

The next 8 questions ask about sexual behavior.

#### Q-58 Have you ever had sexual intercourse?

		<u>Percent</u>
A.	Yes	84.1%
B.	No	15.9%

#### Q-59 How old were you when you had sexual intercourse for the first time?

	•	<u>Percent</u>
A.	I have never had sexual intercourse	16.4%
В.	11 years old or younger	9.3%
C.	12 years old	10.4%
D.	13 years old	14.8%
E.	14 years old	19.7%
F.	15 years old	13.7%
G.	16 years old	11.5%
Н.	17 years old or older	4.1%

#### Q-60 During your life, with how many people have you had sexual intercourse?

		<u>Percent</u>
A.	I have never had sexual intercourse	16.1%
В.	1 person	10.3%
C.	2 people	9.4%
D.	3 people	12.8%
E.	4 people	10.0%
F.	5 people	8.6%
G.	6 or more people	32.8%

#### Q-61 During the past 3 months, with how many people did you have sexual intercourse?

	<u>Percent</u>
I have never had sexual intercourse	16.5%
I have had sexual intercourse, but not during the past	
3 months	17.4%
1 person	40.2%
2 people	12.9%
3 people	6.6%
4 people	2.2%
5 people	1.4%
6 or more people	2.8%
	I have had sexual intercourse, but not during the past 3 months 1 person 2 people 3 people 4 people 5 people

#### Q-62 Did you drink alcohol or use drugs before you had sexual intercourse the last time?

		reicent
A.	I have never had sexual intercourse	18.7%
B.	Yes	35.4%
C.	No	45.9%

#### Q-63 The last time you had sexual intercourse, did you or your partner use a condom?

		<u> </u>
A.	I have never had sexual intercourse	17.6%
B.	Yes	40.5%
C.	No	41.9%

Percent

### Q-64 The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? (Select only one response.)

		<u>Percent</u>
A.	I have never had sexual intercourse	16.6%
B.	No method was used to prevent pregnancy	16.1%
C.	Birth control pills	14.7%
D.	Condoms	33.8%
E.	Depo-Provera (injectable birth control)	6.9%
F.	Withdrawal	6.4%
G.	Some other method	3.0%
Н.	Not sure	2.5%

#### Q-65 How many times have you been pregnant or gotten someone pregnant?

		reiceiii
A.	0 times	77.2%
B.	1 time	17.5%
C.	2 or more times	4.4%
D.	Not sure	0.8%

Dorcont

Percent

The next 7 questions ask about body weight.

#### Q-66 How do you describe your weight?

		Percent
A.	Very underweight	4.1%
B.	Slightly underweight	12.6%
C.	About the right weight	50.3%
D.	Slightly overweight	27.5%
E.	Very overweight	5.5%

#### Q-67 Which of the following are you trying to do about your weight?

		<u>Percent</u>
A.	Lose weight	43.0%
B.	Gain weight	15.6%
C.	Stay the same weight	19.5%
D.	I am not trying to do anything about my weight	21.9%

## Q-68 During the past 30 days, did you exercise to lose weight or to keep from gaining weight?

		refeelt
A.	Yes	45.1%
B.	No	54.9%

### Q-69 During the past 30 days, did you eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?

		<u>r ercent</u>
A.	Yes	36.2%
B.	No	63.8%

### Q-70 During the past 30 days, did you go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight?

	<u>Percent</u>
A. Yes	22.5%
B. No	77.5%

## Q-71 During the past 30 days, did you take any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? (Do not include meal replacement products such as Slim Fast.)

		<u>Percent</u>
A.	Yes	16.7%
B.	No	83.3%

### Q-72 During the past 30 days, did you vomit or take laxatives to lose weight or to keep from gaining weight?

		Percent
A.	Yes	9.7%
B.	No	90.3%

The next 7 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed.

# Q-73 During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice? (Do not count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)

		<u>Percent</u>
A.	I did not drink 100% fruit juice during the past 7 days	18.6%
B.	1 to 3 times during the past 7 days	43.3%
C.	4 to 6 times during the past 7 days	15.9%
D.	1 time per day	5.2%
E.	2 times per day	7.1%
F.	3 times per day	5.8%
G.	4 or more times per day	4.1%

#### Q-74 During the past 7 days, how many times did you eat fruit? (Do not count fruit juice.)

	Percent
A. I did not eat fruit during the past 7 days	22.0%
B. 1 to 3 times during the past 7 days	43.3%
C. 4 to 6 times during the past 7 days	14.0%
D. 1 time per day	10.2%
E. 2 times per day	5.0%
F. 3 times per day	2.8%
G. 4 or more times per day	2.8%

#### Q-75 During the past 7 days, how many times did you eat green salad?

		Percent
A.	I did not eat green salad during the past 7 days	40.5%
B.	1 to 3 times during the past 7 days	39.7%
C.	4 to 6 times during the past 7 days	11.8%
D.	1 time per day	5.8%
E.	2 times per day	1.4%
F.	3 times per day	0.5%
G.	4 or more times per day	0.3%

### Q-76 During the past 7 days, how many times did you eat potatoes? (Do not count french fries, fried potatoes, or potato chips.)

		<u>Percent</u>
A.	I did not eat potatoes during the past 7 days	29.6%
B.	1 to 3 times during the past 7 days	46.7%
C.	4 to 6 times during the past 7 days	18.2%
D.	1 time per day	3.3%
E.	2 times per day	1.4%
F.	3 times per day	0.6%
G.	4 or more times per day	0.3%

#### Q-77 During the past 7 days, how many times did you eat carrots?

		<u>Percent</u>
A.	I did not eat carrots during the past 7 days	53.3%
B.	1 to 3 times during the past 7 days	34.4%
C.	4 to 6 times during the past 7 days	7.4%
D.	1 time per day	3.0%
E.	2 times per day	1.1%
F.	3 times per day	0.5%
G.	4 or more times per day	0.3%

### Q-78 During the past 7 days, how many times did you eat other vegetables? (Do not count green salad, potatoes, or carrots.)

		<u>Percent</u>
A.	I did not eat other vegetables during the past 7 days	21.2%
B.	1 to 3 times during the past 7 days	45.3%
C.	4 to 6 times during the past 7 days	19.5%
D.	1 time per day	6.9%
E.	2 times per day	4.7%
F.	3 times per day	1.1%
G.	4 or more times per day	1.4%

# Q-79 During the past 7 days, how many glasses of milk did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)

		<u>Percent</u>
A.	I did not drink milk during the past 7 days	12.5%
B.	1 to 3 glasses during the past 7 days	21.4%
C.	4 to 6 glasses during the past 7 days	18.4%
D.	1 glass per day	13.6%
E.	2 glasses per day	15.0%
F.	3 glasses per day	10.3%
G.	4 or more glasses per day	8.6%

Q-80 On how many of the past 7 days did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activities?

		Percent
A.	0 days	29.2%
B.	1 day	13.8%
C.	2 days	12.1%
D.	3 days	13.5%
E.	4 days	6.9%
F.	5 days	9.6%
G.	6 days	2.5%
Н.	7 days	12.4%

Q-81 On how many of the past 7 days did you participate in physical activity for at least 30 minutes that did not make you sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?

		<b>Percent</b>
0 days		31.2%
1 day		14.1%
2 days		15.7%
3 days		12.2%
4 days		7.7%
5 days		4.7%
6 days		2.2%
7 days		12.2%
	1 day 2 days 3 days 4 days 5 days 6 days	1 day 2 days 3 days 4 days 5 days 6 days

Q-82 On how many of the past 7 days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?

	Percent
0 days	40.2%
1 day	13.4%
2 days	12.6%
3 days	10.9%
4 days	5.3%
5 days	5.0%
6 days	2.2%
7 days	10.3%
	1 day 2 days 3 days 4 days 5 days 6 days

#### Q-83 On an average school day, how many hours do you watch TV?

		<u>Percent</u>
A.	I do not watch TV on an average school day	17.7%
B.	Less than 1 hour per day	19.7%
C.	1 hour per day	14.0%
D.	2 hours per day	19.1%
E.	3 hours per day	15.7%
F.	4 hours per day	9.0%
G.	5 or more hours per day	4.8%

Q-84 In an average week when you are in school, on how many days do you go to physical education (PE) classes?

		<u>Percent</u>
A.	0 days	61.3%
B.	1 day	5.6%
C.	2 days	5.6%
D.	3 days	2.8%
E.	4 days	2.0%
F.	5 days	22.6%

Q-85 During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?

		<u>Percent</u>
A.	I do not take PE	56.5%
B.	Less than 10 minutes	4.2%
C.	10 to 20 minutes	6.8%
D.	21 to 30 minutes	11.6%
E.	31 to 40 minutes	8.8%
F.	41 to 50 minutes	8.8%
G.	51 to 60 minutes	2.3%
Н.	More than 60 minutes	1.1%

Q-86 During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)

		Percent
A.	0 teams	73.5%
B.	1 team	16.9%
C.	2 teams	5.9%
D.	3 or more teams	3.7%

The next question asks about AIDS education.

Q-87 Have you ever been taught about AIDS or HIV infection in school?

·	<u>Percent</u>
A. Yes	87.9%
B. No	10.2%
C. Not sure	2.0%

Q-88 At school during the past 12 months, did you receive help from a resource teacher, speech therapist or other special education teacher?

	_	<u>Percent</u>
A.	Yes	24.3%
B.	No	75.7%

#### Q-89 How often do you wear a seat belt when driving a car?

		<u>Percent</u>
A.	I do not drive a car	20.5%
B.	Never	15.2%
C.	Rarely	17.2%
D.	Sometimes	11.1%
E.	Most of the time	14.4%
F.	Always	21.6%

## Q-90 Do you drive, and did you complete driver education (classroom and behind-the-wheel)?

		<u>Percent</u>
A.	No, I do not drive; I do not have a valid license or	
	permit, and no, I did not complete driver education.	29.6%
В.	No, I do not drive; I do not have a valid license or	
	permit, but yes, I completed driver education.	5.3%
C.	Yes, I drive with a valid license or permit, but no, I did	
	not complete driver education.	15.1%
D.	Yes, I drive with a valid license or permit, and yes, I	
	did completed driver education.	38.8%
E.	Yes, I drive regularly on public roads, but I do not	
	have a valid license or permit.	11.2%

### **APPENDIX B**

**REFERENCED FIGURES** 

Figure 1
Intentional and unintentional injury risk behaviors of alternative school students

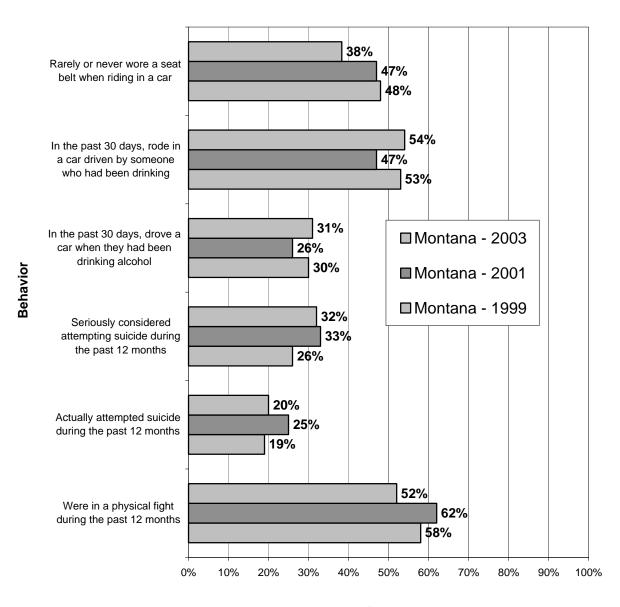


Figure 2

Percent of alternative school students who "Always" wear a seat belt when riding in a car driven by someone else

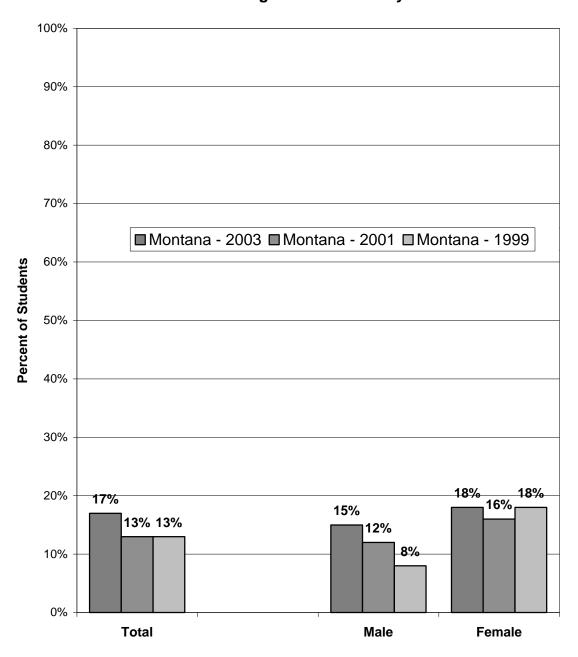
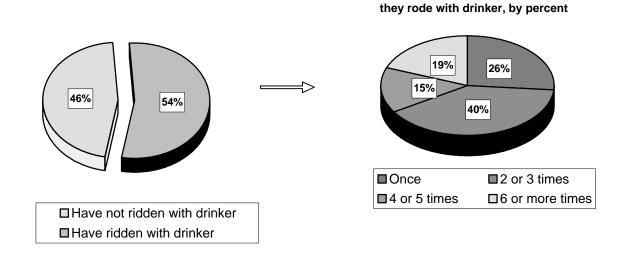


Figure 3

Percent of those alternative school students who, during the past 30 days, reported riding in a vehicle that was driven by someone who had been drinking, by number of times

#### Percent of all alternative school students



Number of times

Figure 4

# Percent of those alternative school students who reported that during the 30 days prior to the survey they drove a vehicle after drinking, by the number of times

#### Percent of all alternative school students

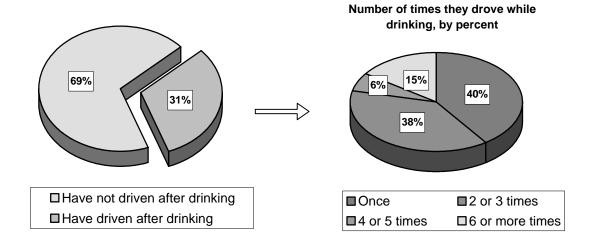
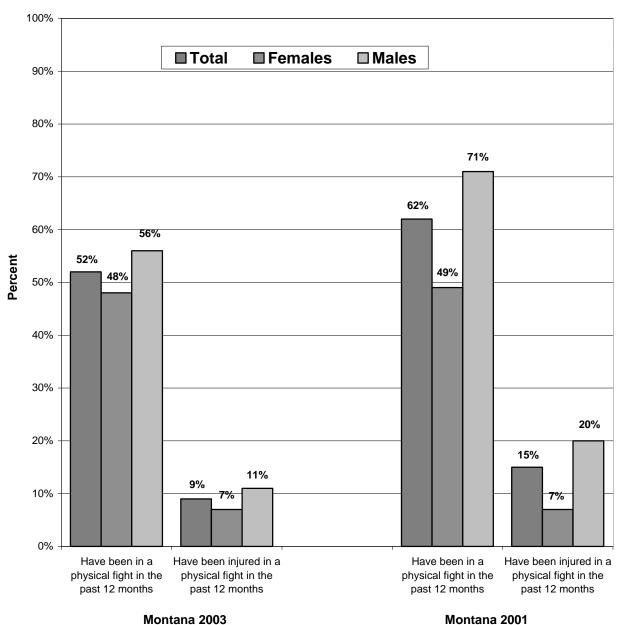


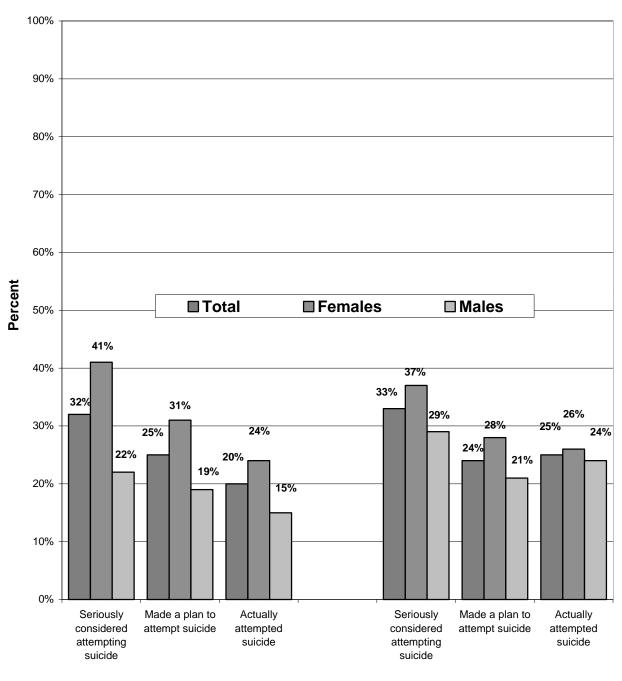
Figure 5 Percent of alternative school students involved and/or injured in a physical fight in the past 12 months



Montana 2003

Figure 6

Percent of alternative school students who contemplated, planned, or attempted suicide in the past 12 months



Montana 2003

Montana 2001

Figure 7

Tobacco use risk behaviors of alternative school students

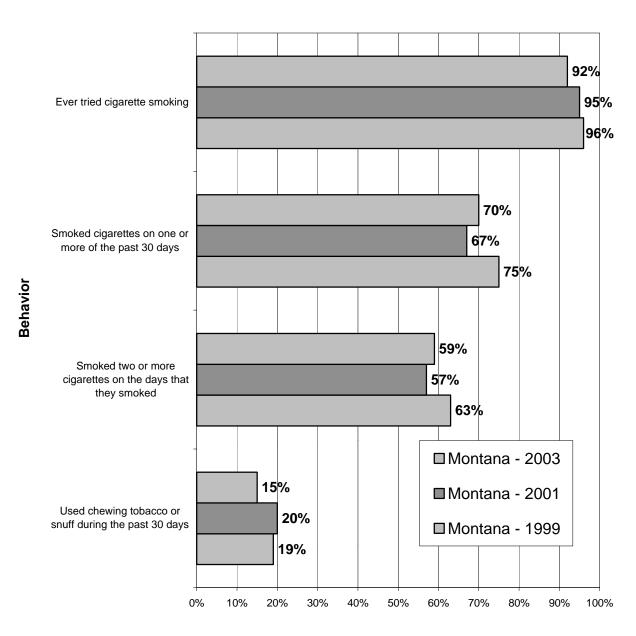
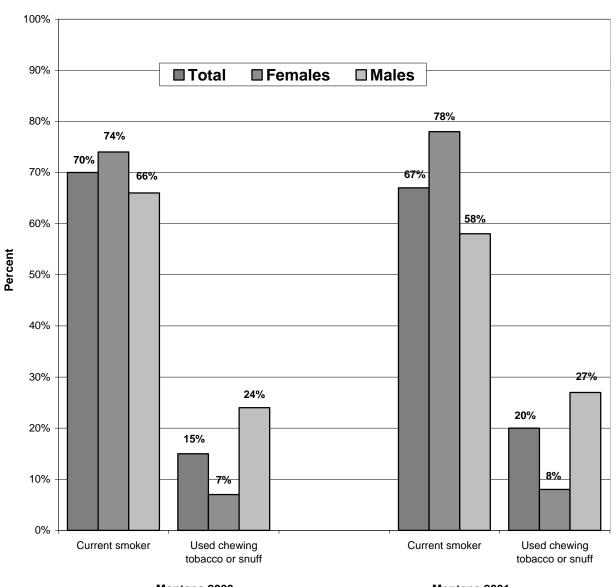


Figure 8

Percent of alternative school students who reported that they were current smokers or that they used chewing tobacco or snuff in the 30 days prior to the survey, by gender



Montana 2003 Montana 2001

Figure 9

Alcohol and drug abuse risk behaviors of Montana alternative school students

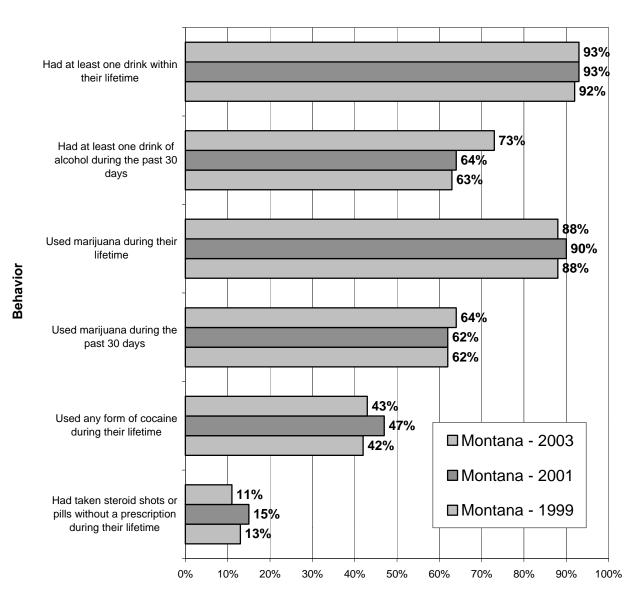
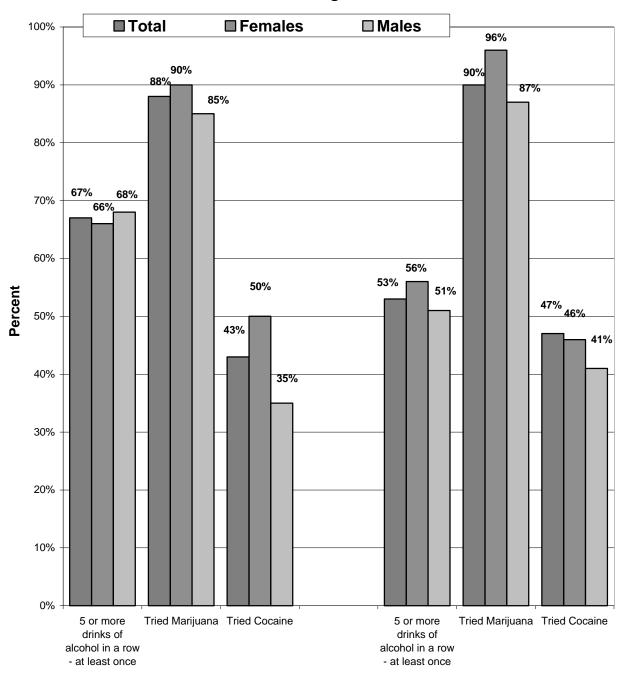


Figure 10

Percent of alternative school students with a potential for alcohol and drug abuse



Montana 2003

Montana 2001

Figure 11
Sexual behaviors of alternative school students

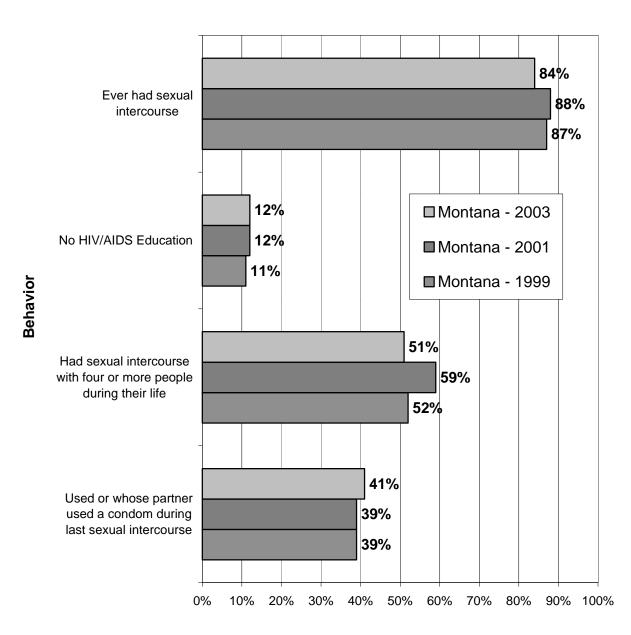


Figure 12

Percent of alternative school students who reported ever having had sexual intercourse, by gender

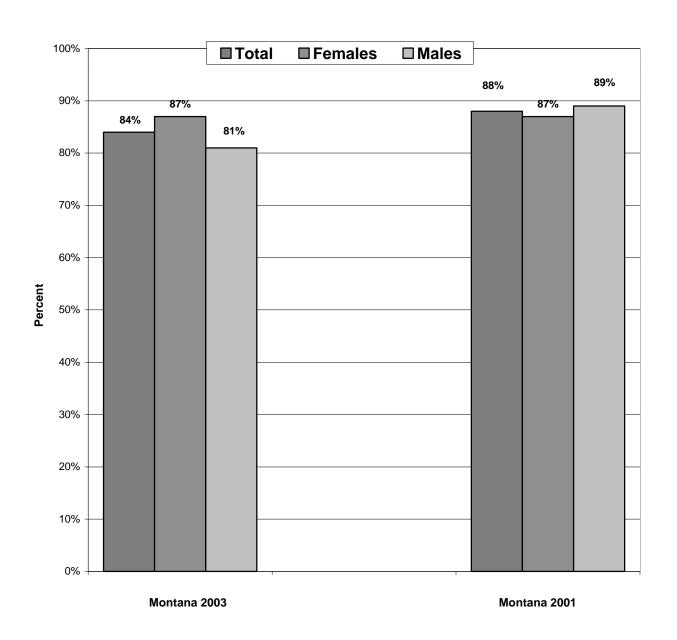
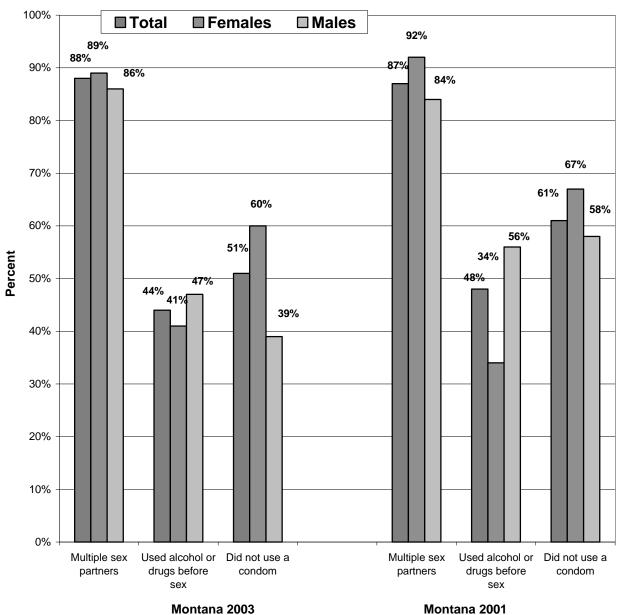


Figure 13 Percent of alternative school students who have had sexual intercourse and reported having engaged in high-risk sexual behaviors



Montana 2001

Figure 14
Physical activities of alternative school students

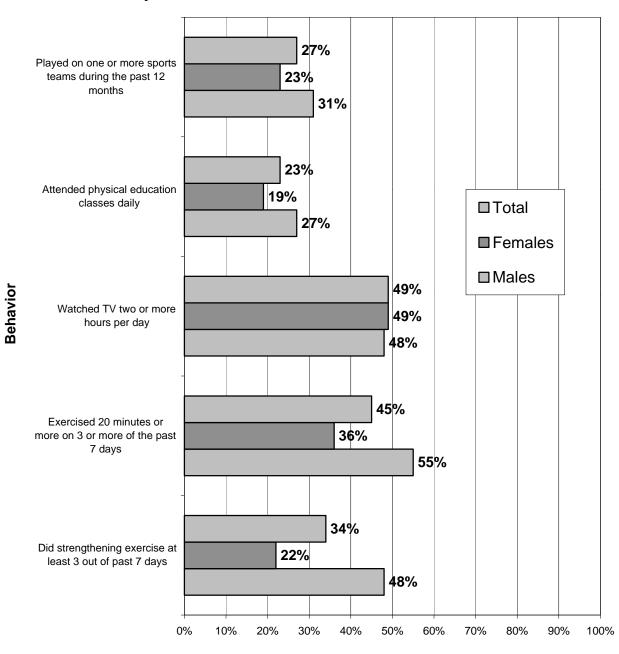
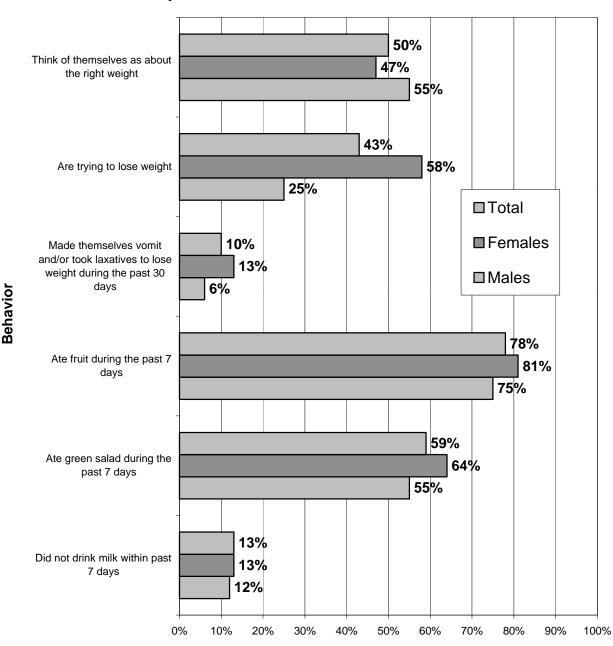


Figure 15
Dietary behaviors of alternative school students



### **APPENDIX C**

**ADDITIONAL CHARTS** 

### List of Charts in Appendix C

Topic	YRBS Question	<u>Chart</u>
Demographic - age	Q-1	1
Demographic - grade	Q-3	2
Seat belt usage	Q-9	3
Seat belt usage	Q-89	4
Physical fighting	Q-20	5
Suicide related	Q-23	6
Tobacco use	Q-29	7
Tobacco use	Q-31	8
Tobacco use	Q-33	9
Alcohol use	Q-39	10
Marijuana use	Q-44	11
Drug use	Q-50	12
Drug use	Q-56	13
Sexual behavior	Q-61	14
Sexual behavior	Q-64	15
Weight	Q-66	16
Physical activity	Q-81	17
Physical activity	Q-85	18
Physical activity	Q-86	19
HIV/AIDS Education	Q-87	20

Chart 1 Q-1 How old are you?

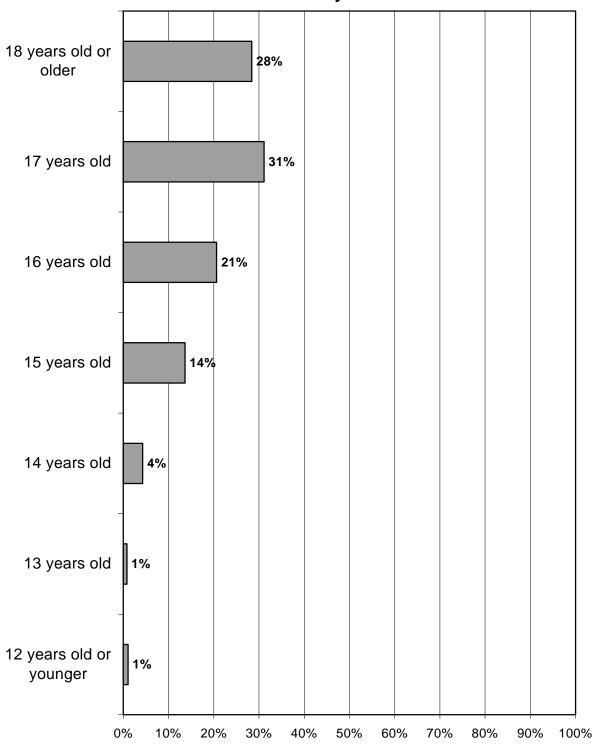


Chart 2 Q-3 In what grade are you?

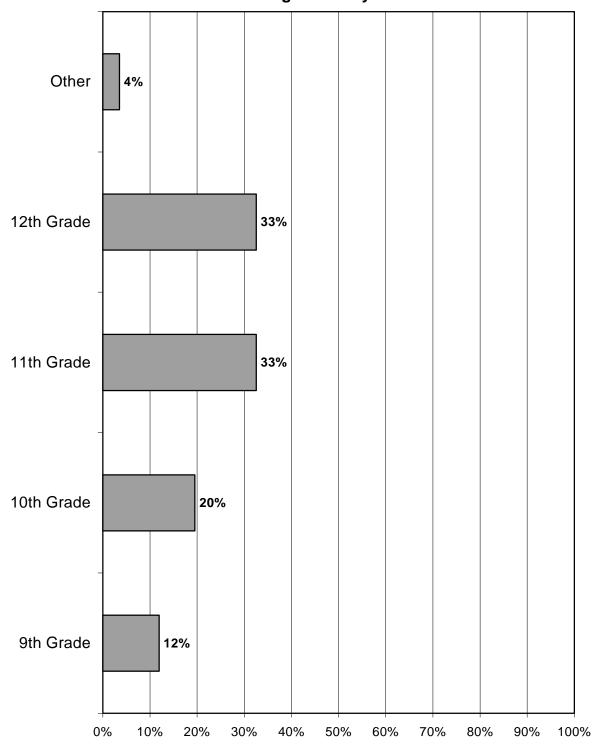


Chart 3
Q-9 How often do you wear a seat belt when riding in a car driven by someone else?

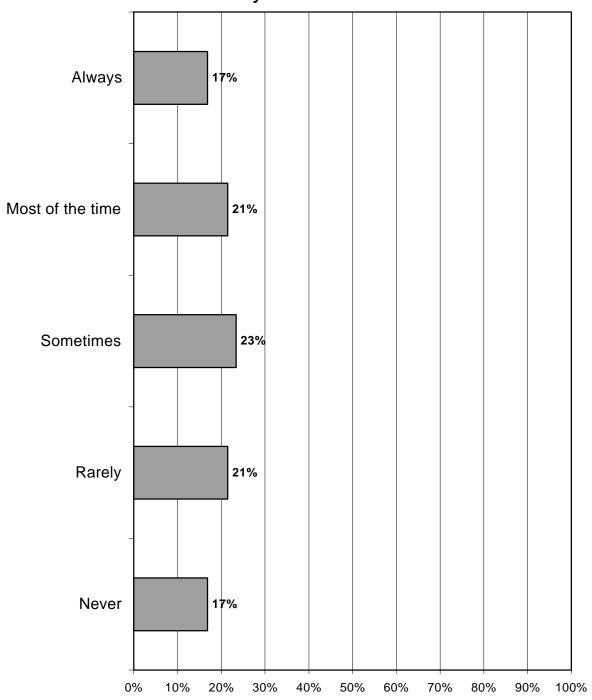


Chart 4
Q-89 How often do you wear a seat belt when driving a car?

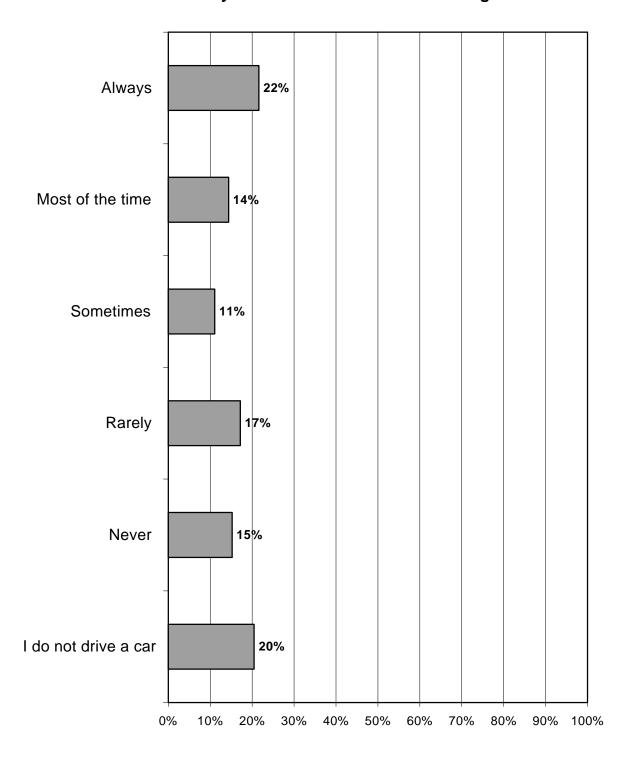


Chart 5
Q-20 During the past 12 months, how many times were you in a physical fight on school property?

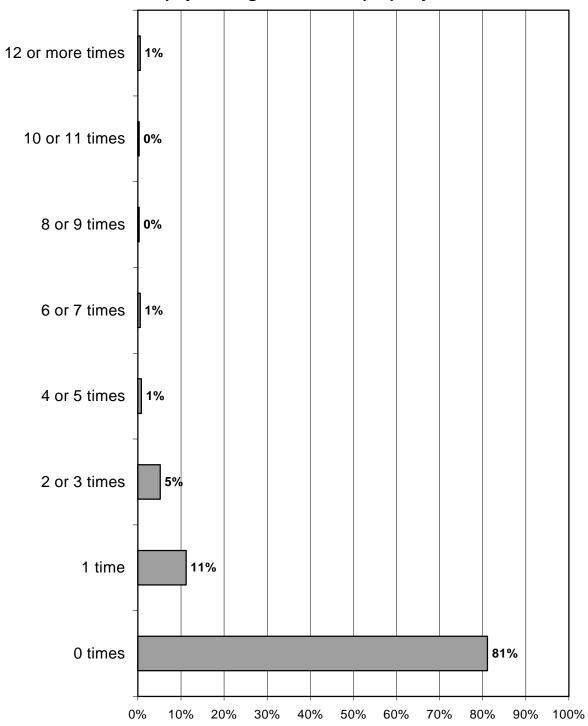


Chart 6
Q-23 During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

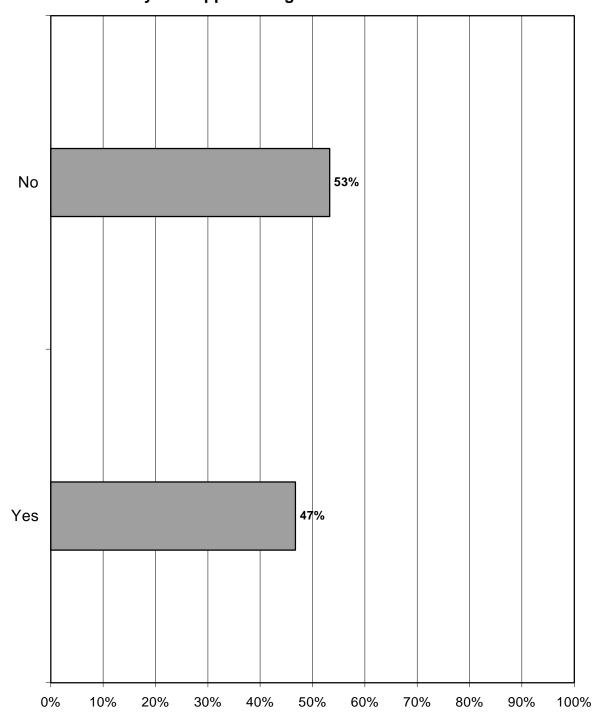


Chart 7
Q-29 How old were you when you smoked a whole cigarette for the first time?

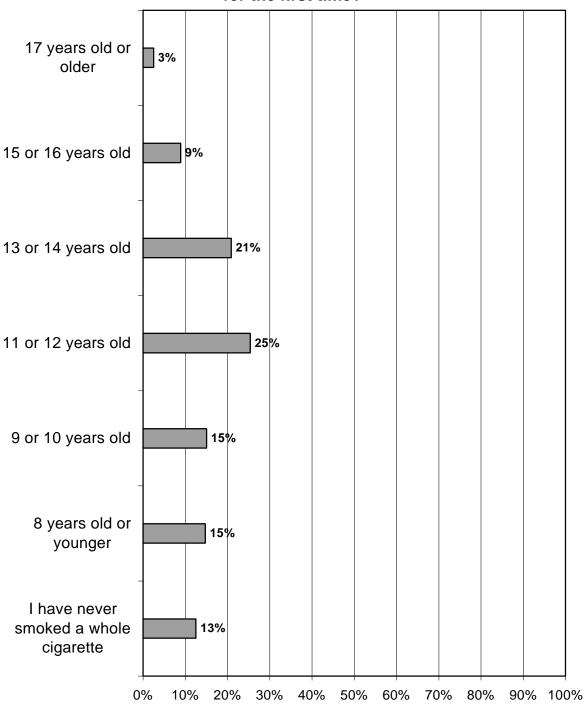


Chart 8
Q-31 During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

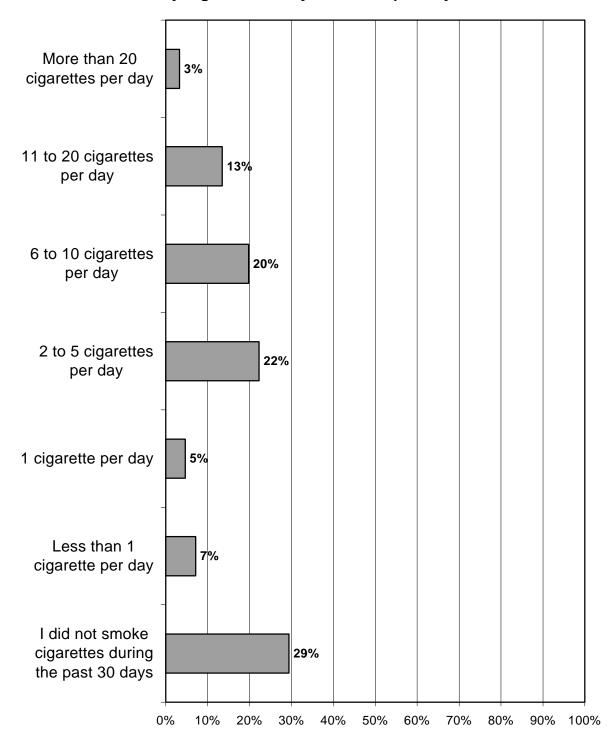


Chart 9
Q-33 During the past 30 days, on how many days did you smoke cigarettes on school property?

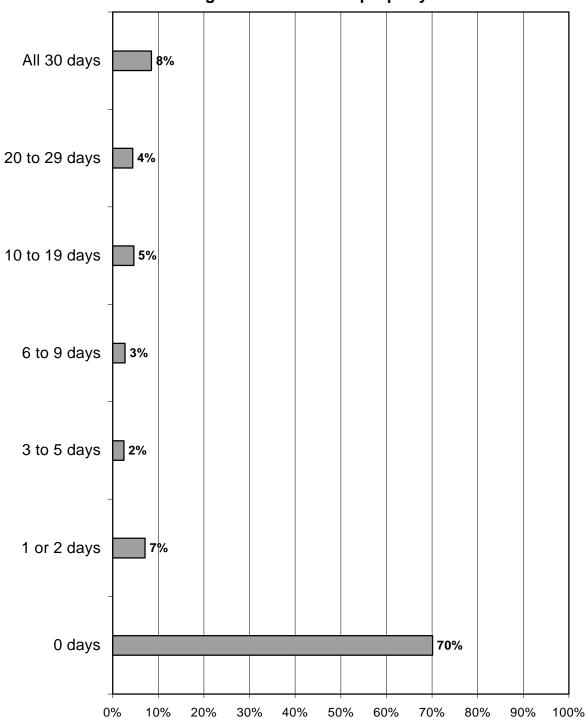


Chart 10
Q-39 During your life, on how many days have you had at least one drink of alcohol?

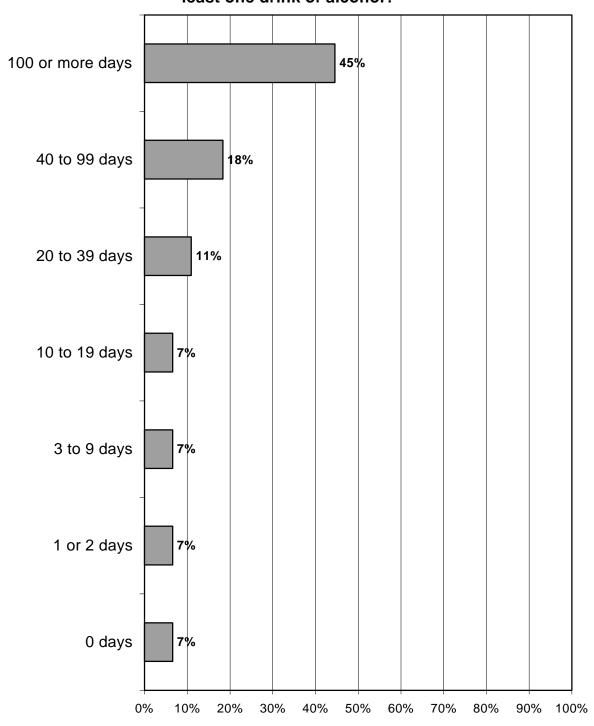


Chart 11
Q-44 During your life, how many times have you used marijuana?

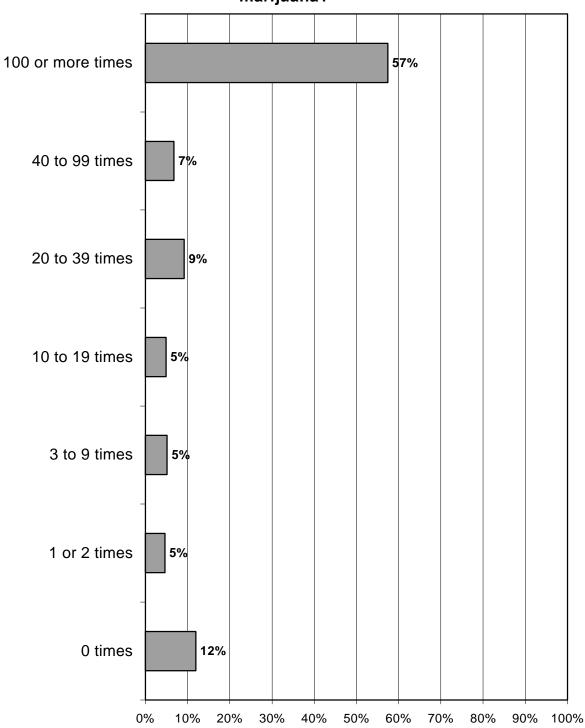


Chart 12
Q-50 During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

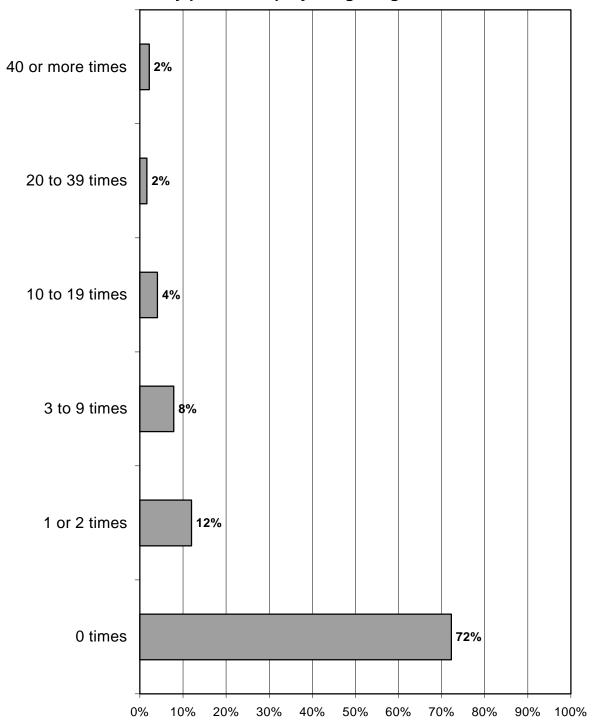


Chart 13
Q-56 During your life, how many times have you used a needle to inject any illegal drug into your body?

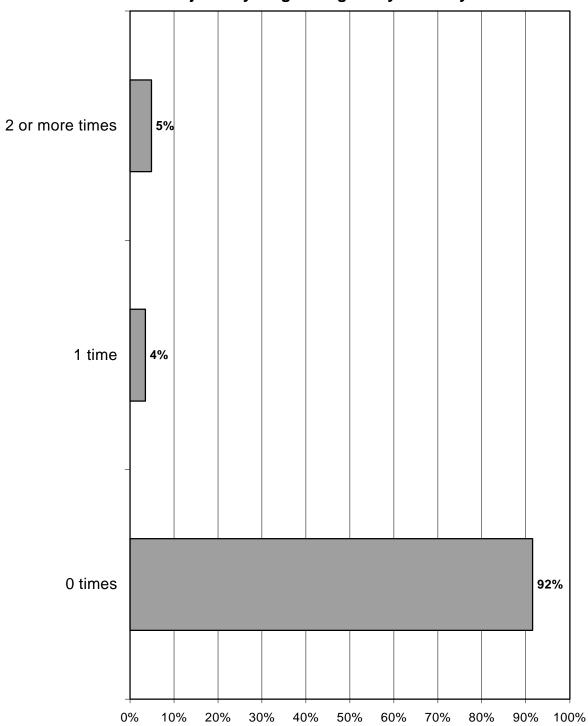


Chart 14
Q-61 During the past 3 months, with how many people did you have sexual intercourse?

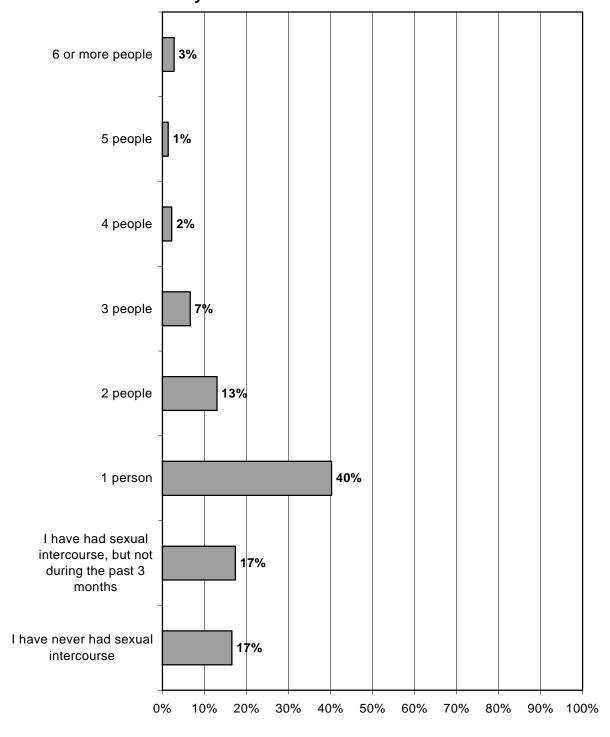


Chart 15
Q-64 The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy?
(Select only one response.)

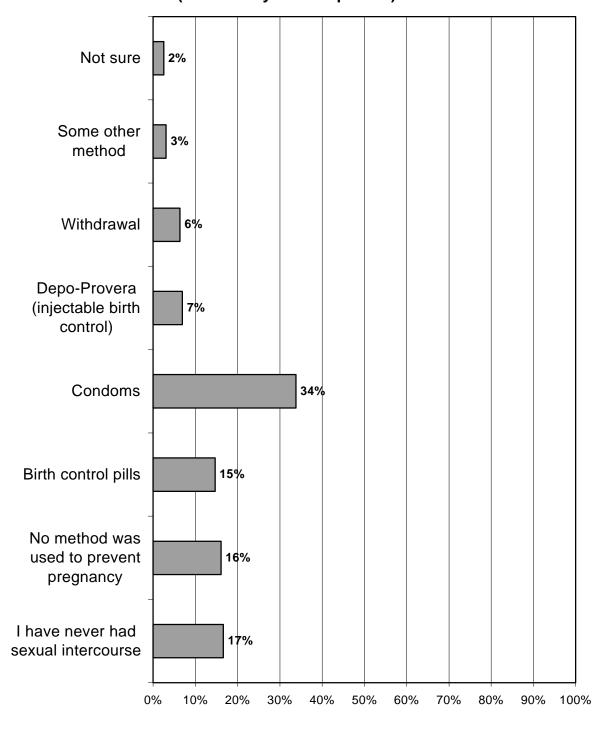
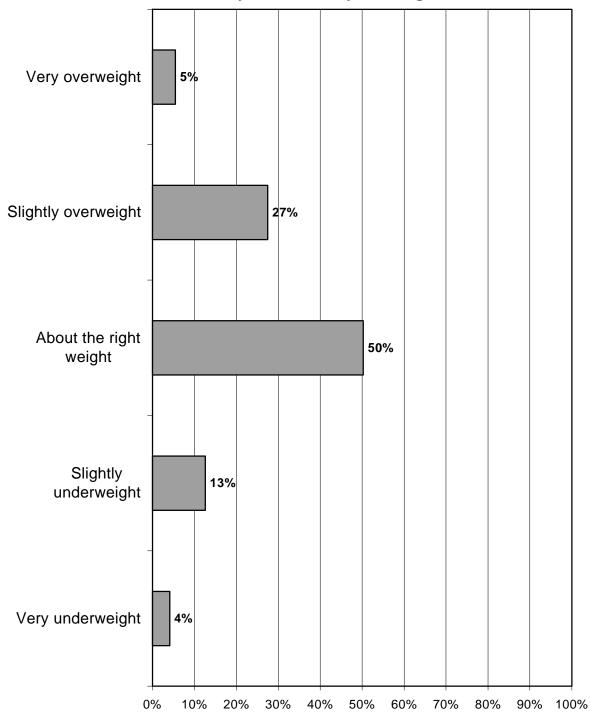


Chart 16
Q-66 How do you describe your weight?



## Chart 17

Q-81 On how many of the past 7 days did you participate in physical activity for at least 30 minutes that did not make you sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?

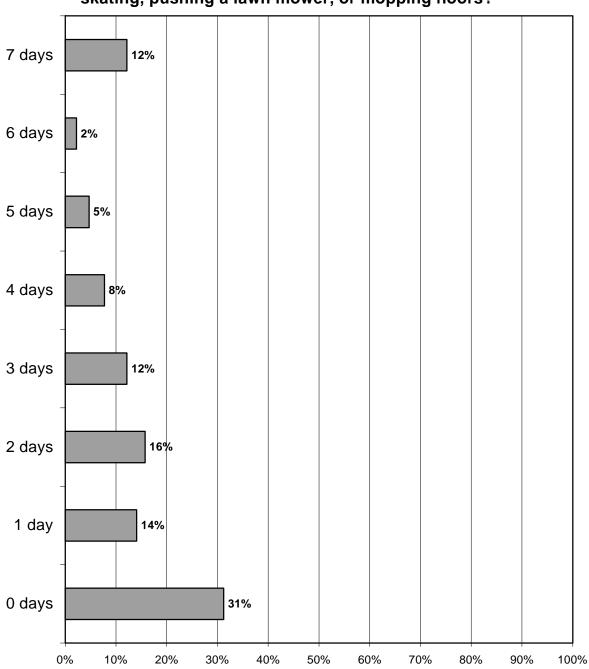


Chart 18

Q-85 During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?

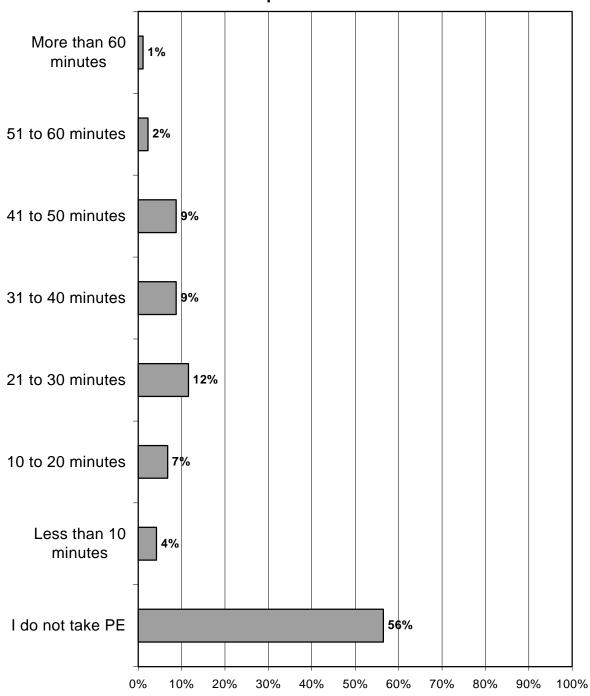


Chart 19

Q-86 During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)

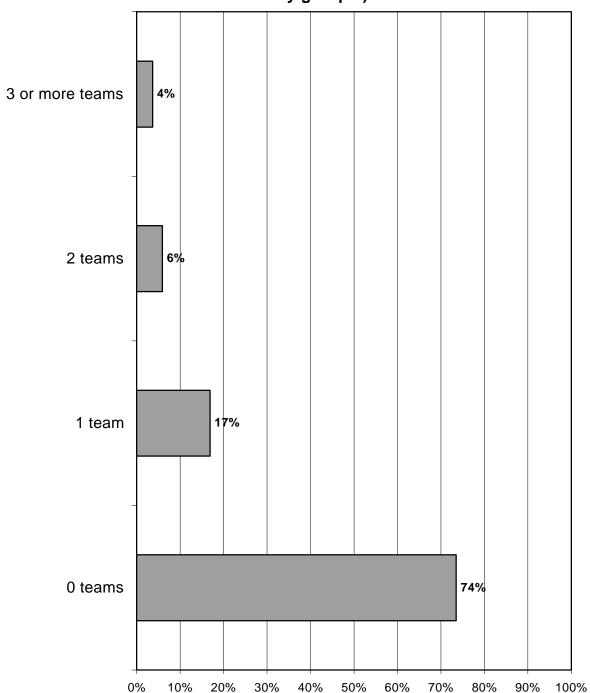
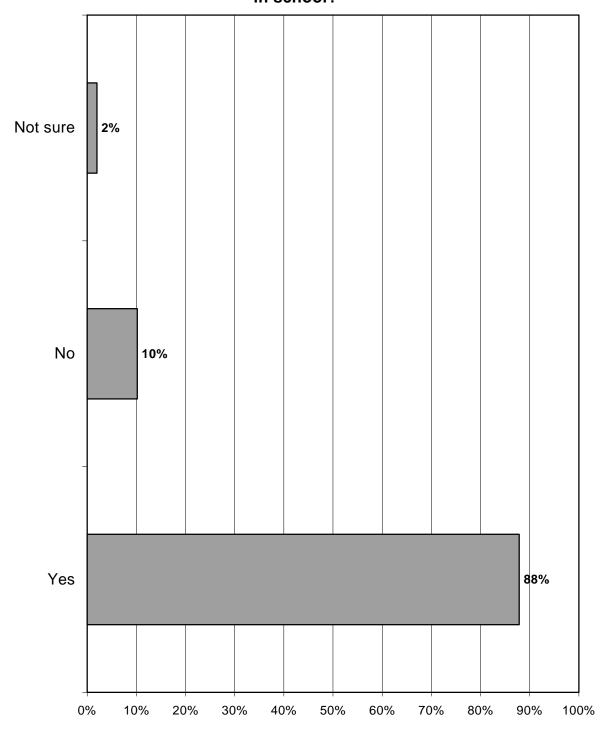


Chart 20
Q-87 Have you ever been taught about AIDS or HIV infection in school?



## Montana Office of Public Instruction

Montana Board of Crime Control

Montana Department of Public Health & Human Services

Indian Health Service

Healthy Mothers Healthy Babies

Blue Cross and Blue Shield of Montana

Montana Department of Transportation Traffic & Safety Bureau

Division of Adolescent and School Health Centers for Disease Control and Prevention

